MEDITAL RESERVICE COUNTRY



County Gorough of Southampton.

Annual Report

ON THE

Health of Southampton
FOR THE YEAR 1913.

BY

R. E. LAUDER, M.D., F.R.C.S., Ed., D.P.H.,

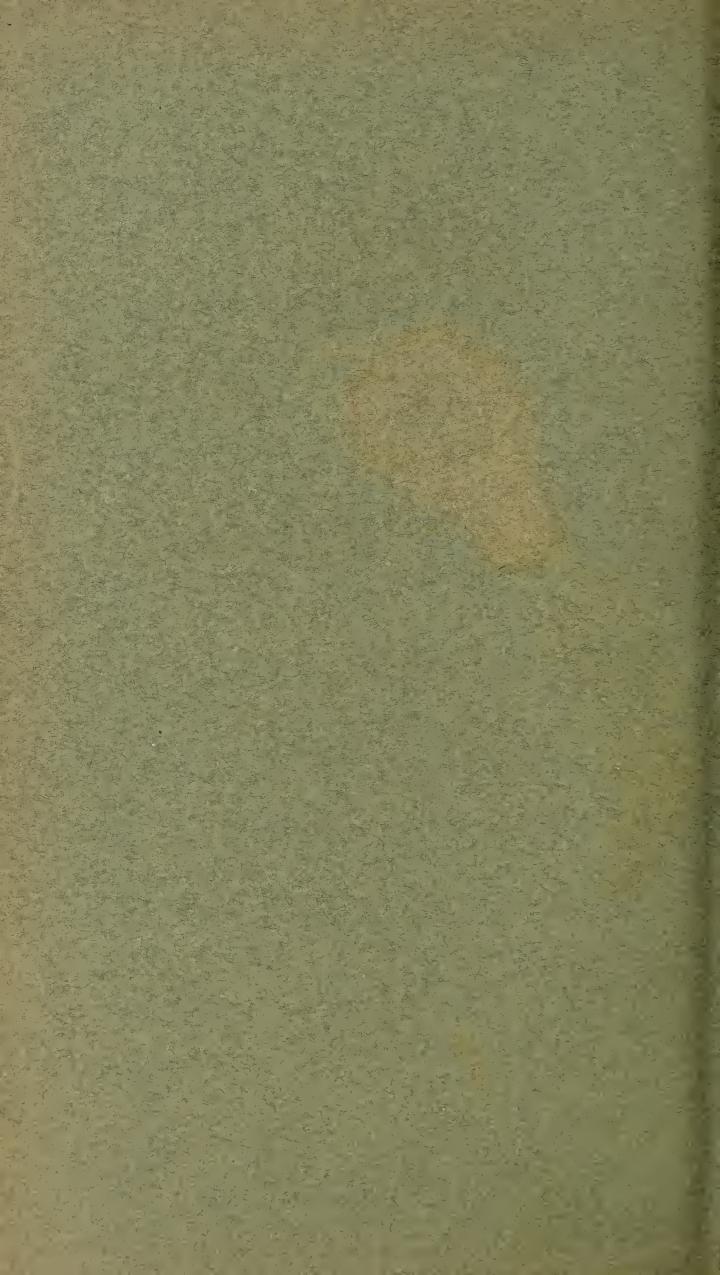
Medical Officer of Health for the County Borough and Port of Southampton.

Medical Superintendent of the Borough and Port Fever Hospitals.

SOUTHAMPTON:

Hampshire Advertiser Company, Limited, 29, High Street.

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COUNTY BOROUGH OF SOUTHAMPTON.

ANNUAL REPORT OF MEDICAL OFFICER OF HEALTH.

To the Mayor, Aldermen, and Councillors.

Mr. Mayor and Gentlemen,

I have the honour to submit for your information, in accordance with the order of the Local Government Board, my Annual Report upon the condition of the public health, and a record of the administrative work carried out by the Health Department for the year 1913, together with the vital statistics of the Borough. A summary of the work done and action taken under the Factory and Workshop Act, 1907, the Midwives' Act, 1902, and the Housing, Town Planning, etc., Act, 1909, is also included in the Report.

The Report also includes particulars as to the incidence of, and action taken respecting infectious disease. The prevalence of, and control over, Tuberculosis during the year is specially dealt with in this Report.

The health of the Borough was again of a satisfactory nature, the death-rate, and infantile mortality rate being lower than in the previous year.

I am, Mr. Mayor and Gentlemen,

Your Obedient Servant,

R. E. LAUDER,

Medical Officer of Health.

REPORT.

STATISTICAL SUMMARY FOR THE COUNTY BOROUGH OF SOUTHAMPTON.

Acreage	• • •	• • •	• • •	• • •	• • •	• • •	4,604
,, (inclu					re)		5,817
Population (es						• • •	122,412
Number of Per						• • •	26.6
Number of Inh)11)	20,275
Rateable Value				• • •	•••	• • •	£645,885
Births		-	-,	• • •			2,957
Birth Rate		• • •	• • •	• • •			23.8
Deaths							1,604
Death Rate		• • •	• • •	• • •		• • •	12.90
,, C	orrected	for ag	e and s	ex dist	ributior	ı	12.35
,, f1	rom Zyn	notic Ď	Diseases	• • •			0.98
Average Death	n Rate (?	ro year	rs, 1903	-1912)	• • •	• • •	13.91

POPULATION.

The population of the Borough on the 1st July, 1913, was estimated by the Registrar-General to amount to 122,412, which is an increase of 3,400 since the Census of April, 1911. This estimate is based on the assumption of an annual rate of increase equal to the mean rate in the period 1901–1911.

This estimate is probably less than the actual, as other methods than that adopted by the Registrar-General point to the rate of increase at the present time being greater than during the previous intercensal period.

The total number of buildings used as dwellings at the Census amounted to 23,401, of which 836 were returned by the enumerators as uninhabited. This number is equal to 3.6 per cent. of the total.

At the end of December, 1913, the number of buildings used as dwellings upon the Rate Books was 24,764. An enumeration made at the same date by the staff of the Health Department of void premises in the Borough amounted to only 226, which is a considerable decrease when compared with the Census, and shows that less than one per cent. of the inhabitable buildings in the Borough were empty on that date.

The average number of persons in ordinary dwelling houses at the Census was 5.08. Therefore, at the end of the year 1913, if the number of dwellings on the rate books are taken and the void houses deducted the estimate of the population amounts to 124,653.

The method of adding the estimated population occupying the houses completed for occupation since the Census gives a population of 123,558 at the middle of the year, without taking into account the reduction in the number of void houses.

A third method of adding the natural increase of births over deaths, 3,461, gives a population of 122,473.

The estimate of the Registrar-General is adopted for all statistical purposes.

METEOROLOGY.

"A dull year, an open winter, a wet spring, a summer very dry but neither sunny nor warm, and a uniformly mild autumn," is the description given by the Meteorological Office of the climatic conditions of the year 1913 in the British Isles.

This description also applies to the weather experienced in Southampton. It was a healthy year without any extremes of temperature, the mean of the minimum temperatures being as much as 1.5 degrees above the average, and the approximate mean temperature 51.9 degrees, was 0.9 above the average of the previous ten years.

The three summer months—June, July and August—were very dry, only 2.6 inches of rain falling in the three months ending 30th August. These three months, therefore, were practically as dry as the hot summer of 1911 but there were nearly 330 hours of sunshine less.

The spring and autumn were wet, the rainfall for the year being only one inch below the average.

In the Annual Summary for the year 1913 issued by the Meteorological Office, Greenwich, the mean temperature of towns along the South Coast is given as:—

Penzance	• • •	53.2	Falmouth	• • •	51.7
Plymouth	• • •	52.I	Worthing		51.7
Southampton	• • •	51.9	Bournemouth	• • •	51.4
Brighton		51.9	Hastings		51.4
Eastbourne		51.8	Dover		50.3

By the courtesy of the Director-General of Ordnance Survey—Col. C. F. Close, C.M.G., R.E., an abstract from the Meteorological Register kept at the Ordnance Survey Office, Southampton, during the year 1913, and the averages for ten years—1903—1912—are appended in a Table at the end of the Report (page 133).

BIRTHS.

The birth-rate for the year amounted to 23.78 per 1000 of the population. This is an increase of 0.49 above the rate recorded last year, but is 1.83 below the average of the last ten years—1903–1912.

The number of births registered in the Borough amounted to 2,957 during the year, which included the fifty-three weeks ending 3rd January, 1914. This number is an increase of 151 compared with the previous year (52 weeks) when 2,806 births were recorded. The excess of births over deaths amounted to 1,353 compared with 1,209 in 1912 and 1,039 in 1911.

Of the 2,957 births registered, 1,495 were males and 1,462 females, the proportion of males to females being 1,023 males to every 1,000 females. The proportion in the previous ten years was 1,052, and the average for England and Wales 1,039.

The illegitimate births registered amounted to 115 compared with 97 in the previous year. This number is equal to a rate of 0.92 per 1,000 of the population, and to 39 illegitimate births to every 1,000 births registered. The average for England and Wales is 1.0 and 41 respectively. The occupation of the mother was given as domestic servant in 50 instances.

The birth-rate in the Municipal Wards was highest in Northam, Millbrook and Shirley Wards, and lowest in Banister and All Saints Wards. There was an increase in the birth-rate in Town, Trinity, Newtown, All Saints, Bevois, Banister, Freemantle, Portswood, and St. Denys Wards, and a decrease in St. Marys, Northam, Millbrook, and Shirley Wards.

The birth-rates in the Municipal Wards in 1913 are appended:—

Northam	• • •	30.3	St. Marys		22.9
Millbrook		28.4	Bevois		21.3
Shirley		27.8	Freemantle		21.0
Trinity		26.I	Newtown		20.3
Portswood		_	All Saints		
St. Denys					_
Town		24.6			3.1
Portswood St. Denys	• • •	24.8 24.8	All Saints Banister	• • •	20.3 16.9 15.8

The birth-rates in the old Civil Parishes of the Borough were:—

Town	 • • •	23.7
Portswood and Bitterne Park	 • • •	24.I
Shirley, Freemantle, and Millbrook	 	23.7

DEATHS.

The death-rate of the Borough for the year amounted to 12.90 per 1000 of the population. This rate is lower than that of the preceding year, and is 1.01 below the average of the previous ten years.

In comparing the death-rate with other towns and with England and Wales the age and sex constitution of the population has to be taken into account, and the Registrar-General supplies to each of the large towns a factor by which the general death rate of such town should be multiplied to make it comparable with that of England and Wales. This gives a corrected death-rate for each town of what it would be if the age and sex distribution of the population were the same as that of England and Wales. The factor for correction for Southampton is 0.9574, which gives a corrected death-rate of 12.35.

The statistics for the year 1913 relate to the fifty-three weeks ended 3rd January, 1914, and during this period 1,650 deaths were registered, which is an increase of 21 when compared with those recorded in the preceding year (52 weeks).

Of the total of 1,650 deaths registered, 91 were deaths of non-residents coming under the definition of "transferable deaths"; that is, persons who having a fixed or usual residence in England and Wales die in a district other than that in which they resided. On the other hand forty-five deaths of residents of the Borough occurred in other districts and were transferred. The corrected total of deaths belonging to the Borough is, therefore, 1,604.

The death-rate for England and Wales during the year 1913 was 13.7, and for the 96 large towns 14.3 per 1,000 of the population.

The number of deaths of males amounted to 845, and of females 759, the deaths of males being equal to a rate of 14.1, and females of 11.8 per 1,000 of the estimated male and female population of the Borough.

The deaths recorded from the various diseases were generally of an average number, the deaths from Cancer and Heart Diseases showing the largest increase.

Twenty deaths of persons (foreigners or colonials) who had arrived in the Port were registered during the year in the Borough, and having no settled residence in England or Wales are included as residents of the Borough in accordance with the rules of the Local Government Board. The diseases from which these persons died were Diphtheria, I; Beri-beri, I; Phthisis, 6; Cerebro-Spinal Meningitis, I; Bronchitis, I; Pneumonia, 2; Heart Disease, 2; Accident, I; other diseases, 5. These deaths are included in the tabulated statements in this Report.

The death-rate in the Municipal Wards was lowest in Al Saints, Millbrook and Shirley Wards, and highest in Town and St. Marys Wards. The wards in which there was a decrease in the death-rate compared with the previous year were Northam

Trinity, Newtown, All Saints, Millbrook, Shirley, and St. Denys, and those with an increased death-rate were Town, St. Marys, Bevois, Banister, Freemantle, and Portswood.

The death-rate in each of the Municipal wards of the Borough per 1,000 of the population was:—

All Saints	• • •	• • •	9.6	Freemantle		12.0
Millbrook	• • •	• • •	II.2	Portswood		12.3
Shirley		• • •	II.2	Northam		13.2
Banister		• • •	11.3	Bevois		13.7
Newtown	• • •		11.3	St. Marys	• • •	16.8
St. Denys			11.6	Town	• • •	18.4
Trinity	• • •	• • •	11.7			

The causes of death in each of the Municipal wards are shown in Table 9 (page 121).

The death-rate in each of the old Civil Parishes of the Borough was:—

Town	• • •		14.3
Portswood and Bitterne Park			II.4
Shirley, Freemantle, and Millbrook		• • •	11.4

The Borough is now united into one Civil Parish, and is divided into two Registration Districts—east and west—the dividing line being the main street from the Town Quay to the top of the Common.

Of the 1,650 deaths registered in the Borough 571 occurred in public institutions, which is equal to 34.6 per cent. of the total deaths. The percentage in England and Wales was 21.2, and in 96 large towns (including London), 27.8. The Institutions in which the deaths occurred were: Isolation Hospital, 40; Royal South Hants and Southampton Hospital, 152; Shirley Children's Hospital, 3; the Workhouse, 67; Union Infirmary, 282; Nursing Institutions, 27.

Inquests were held on 171 of the deaths registered during the year, which is equal to a percentage of 10.4 of the total deaths. The percentage in England and Wales was 7.2, and in the 96 great towns (including London), 7.9.

TABLE A.

Showing Estimated Population, Birth Rates, Infantile Mortality, and Death Rates in each of the Municipal Wards for the year 1913, together with the Averages for the years 1911-1912.

		1.0	
	Death Rate from All Causes.	17.6 15.5 14.5 14.5 14.7 14.9 14.7 17.7 17.7	14.2
911-1912.	Death Rate from Phthisis.	22. 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1.45
Averages, Years 1911-1912.	Death Rate from Zymotic Diseases.	11.24.2 11.000.1.24.4 1.000.0066.22.1.1.2.1.2.1.2.1.2.2.1.2.2.2.1.2.2.1.2	1.39
Average	Infantile Mortality per 1,000 Births.	137 96 114 97 96 88 108 101 103 127	011
	Birth Rate	. 424. . 424. . 424. . 120. . 120.	23.6
	Death Rate from All Causes.	18. 16. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19	12.9
	Death Rate from Phthisis.	2.37 1.132 1.09 0.36 0.036 0.098 1.73 1.90	1.21
1913.	Death Rate from Zymotic Diseases.	0.93 1.55 1.61 0.76 0.71 0.86 0.88 0.88 0.89	86.0
	Infantile Mortality per 1,000 Births.	103.2 159.3 67.2 66.7 40.7 72.6 64.3 103.4 74.1	81.5
	Birth Rate	24.2 20.2 20.2 20.3	23.8
Esti- mated	popula- tion Middle of 1913.	11,647 12,679 11,597 11,597 8,345 8,245 8,029 9,688 8,811 8,811	122,412
	Ward.	Town St. Mary's Northam Trinity Newtown All Saints Bevois Banister Freemantle Millbrook Shirley Shirley St. Deny's	Totals
1		1.2.6.4.2.0.7.8.0.0.1.1.1.1.2.1.1.2.1.1.2.1.1.2.1.1.2.1.1.2.1.1.2.1.1.2.1.1.2.1.1.2.1.1.2.2.1.2.2.1.2	1

INFANTILE MORTALITY.

The deaths of infants under one year of age recorded during he year amounted to 241, which is equal to a rate of 81.5 per 1,000 births registered during the same period.

This rate, 81.5, is lower than that of the previous year, which vas 84.4. In 1911 the rate was 135, and in 1910, 79, the latter is the lowest recorded in the Borough.

The infantile mortality rate in 1913 in England and Wales was 109, and in the 96 great towns (including London), 117.

Seventy-four of the deaths occurred during the first week of life, which is equal to 30.7 per cent. of the total recorded. In the previous year the percentage was 27.

The causes which were responsible for the largest number of leaths of infants under one year of age during the last three years are:—

	1911.	1912.	1913.
Diarrhœa and Enteritis	131	28	30
Premature Birth	65	55	64
Atrophy, Debility, and Marasmus	49	27	25
Bronchitis and Pneumonia	56	42	45
Measles	4	2	IO

The deaths of illegitimate infants numbered 22, which, calculated upon the number of illegitimate births registered during the same period is equal to an infantile mortality rate of 191.2, compared with 77.4 for legitimate infants.

Similar rates for five years are given for comparison:—

			L Infa	egitimate ant Morta Rate.	e ality	Illegitimate Infant Mortality Rate.
1909			• • •	99	• • •	311
1910		• • •		75	• • •	164
1911		• • •		128		366
1912		• • •		79		237
1913	• • •	• • •	• • •	77	• • •	191

The infantile mortality in the old Civil Parishes of the Boroug was: Town proper, 86.8; Portswood and Bitterne Park, 76 Shirley, Freemantle and Millbrook, 75.4.

With regard to the rates in Municipal wards, the lower were: All Saints, Newtown, and Banister, and the highest Sanary, Shirley, and Town.

The rates in the Municipal wards are given below, compare with the previous year:—

Ward.				1913.		1912.
All Saints	• • •	• • •		39.2	• • •	57.6
Newtown	• • •	, • • •		40.7	• • •	72.3
Banister			• • •	49.6	• • •	55.6
Freemantle	• • •	• • •		64.3	• • •	50
Trinity	• • •	• • •	• • •	66.7	• • •	78
Northam	• • •	• • •	• • •	67.2	• • •	103.1
Millbrook			• • •	68.1	• • •	89.2
Bevois				72.6	• • •	31.4
St. Denys	• • •	• • •	• • •	74.1		127.9
Portswood	• • •		• • •	85.6	• • •	100.5
Town		• • •	• • •	103.2	• • •	124.1
Shirley		• • •	• • •	103.4	• • •	54.3
St. Marys	• • •	• • •	• • •	159.3	• • •	91.8

The Notification of Births Act came into operation in a Borough on the 9th March, 1908. This Act requires any person in attendance upon the mother within six hours after the tix of birth, to notify the Medical Officer of Health of such birth writing within thirty-six hours of the birth having occurred.

This Act was passed in order that Health Authorities migobtain immediate notice of the occurrence of a birth, thus make it possible for Health Visitors to give early instruction and advice to the mother as to the feeding and treatment of the character of the Registration Act, which allows a limit of six we within which a birth may be registered, it frequently occurs to registration of a birth is only obtained after death has tall place. During the year 140 deaths occurred among infants unsix weeks of age, being 58 per cent. of all those that occur under one year of age.

The number of notifications received during the year under he Act amounted to 2,492, which is 77 less than in the previous ear, but 46 more than in 1911.

The total notified is equal to a percentage of 84.3 of the irths registered during the same period, the percentage being ess than in previous years.

The numbers notified and percentage during the last five ears is shown in the following table:—

	1909.	1910.	1911.	1912.	1913.
Notified by—					
D	302	255	319	289	334
Midwives	1,694	1,788	1,727	1,790	1,836
Other persons preser	nt	·			
in the house	at				
time of birth	612	462	400	490	322
					
	2,608	2,505	2,446	2,569	2,492
		•			
Percentage to birth	hs				
registered during tl	he				
same period	88.8	85.6	85.9	91.1	84.3

On the receipt of notification of births in the old and poorer uarters of the town a Health Visitor visits the house in order lat she may give advice and instruction as to the feeding and anagement of infants if indicated. It is found that as a rule less visits are welcomed, and they are repeated at intervals for vo or three months after the birth of the child if thought ecessary.

Information is also obtained as to the method of feeding the majority of other newly-born children in the Borough with view of obtaining information as to feeding for statistical purposes, and for comparing the mortality amongst breast-fed and ottle-fed children.

It is difficult, however, to arrive at a reliable comparison ving to many infants being weaned two or three months after rth, and as the visits are made within the first two months of rth the figures given below relate only to that period.

It was possible to obtain information in 2,581 instances a to the feeding, of which 2,103 were stated to be fed by breas alone, 96 by mixed feeding, and 382 by cows' milk, condense milk, or patent foods.

The deaths of infants under one year of age amongst thosas to whom information as to feeding had been obtained were as follows:—

How Fed.		Number.	Deaths.	Percentage.
Breast	• • •	2,103	. 88	4.1
Other than Breast-fed	• • •	478	69	14.4

All premises visited in connection with the Notification Births Act were inspected, resulting in 857 sanitary defects nuisances being remedied.

With regard to voluntary child welfare work there is Babies' Welcome and School for Mothers in Southampton. This managed by a Committee of Voluntary Helpers with the character at Holy Trinity Schools, and branches at the Missis Room, King Street, and St. Agnes' Hall, Portswood. Each we there is a talk on some definite subject by a Doctor or certificate nurse, and weighing of babies, and infant consultations. Management mothers have also attended these centres. A mediate officer from the staff of the Health Department frequent attends these centres to speak and to give advice.

During the year the Local Government Board issued a repronound on Infant and Child Mortality in the Urban areas of England a Wales. This report contained an analysis of the condition obtaining in the large towns and some of the more important conclusions drawn from the information collected may be sufficient as follows:—

- (I) Infant Mortality is higher in Urban than in Rt areas.
- (2) The counties having the highest rate of Infant Morta are: Lancashire, Durham, Glamorgan, Nottingh Staffordshire, West Riding of Yorkshire, Northum land, Warwickshire.

- (3) Towns within the same county sometimes within a few miles of each other, show widely divergent Infant Mortality rates.
- (4) Equally marked differences in Infant Mortality rates occur between constituent wards or districts of a large number of towns, these differences not being confined to towns having a high total Infant Mortality.
- (6) The size of a town has no definite relationship to excessive Infant Mortality, this occurring irregularly in towns having a population over and under 50,000.
- (7) A high infant death-rate implies a high death-rate in the next five years of life, while low death-rates at both age periods are similarly associated.
- (8) The relative importance of the many factors causing excessive Infant Mortality is difficult to assess.
- (9) The smallest incidence of disease, occurs usually in districts supplied with water closets.
- (10) Unpaved yards and streets and inefficient scavenging favour excessive Infant Mortality.
- (II) In towns where the general conditions are more satisfactory, excessive Infant Mortality occurs in tenement and other small dwellings.
- (12) Such relationship between large families and high Infant Mortality as is frequently found is in the main indirect, large families being most common among the poorest, who live under conditions unfavourable to child life.
- (13) Infant Mortality is excessive among the poor; it is low among the well-to-do.
- (14) Poverty is a direct cause of Infant Mortality where it induces malnutrition of mother or infant, or where it implies that the mother cannot give adequate care to the infant.

- Poverty is also an indirect cause of Infant Mortality. Its influence is exercised in the following, among other ways:—
 - (a) Poverty is not infrequently associated with ignorance and carelessness.
 - (b) With these are commonly associated overcrowding and uncleanliness.
 - (c) Alcoholic habits frequently result from living under conditions of poverty, the converse also being true.

Poverty, uncleanliness, overcrowding, alcoholic indulgence and disease are closely inter-related in vicious circles, the starting point leading to excessive Infant Mortality not always being the same.

- (16) The importance of the personal factor in the prevention of Infant Mortality is very great.
- (17) The abandonment of breast-feeding without adequate cause is a most important factor of excessive Infant Mortality.

Diagrams are given in the report referred to showing the relative position of the 100 large towns with regard to infant and child mortality during the five years, 1907–1910. Southampton is bracketed as the ninth lowest for death-rate for ages 1 to 5 years, and twelfth lowest for Measles and Whooping Cough.

With regard to deaths under I year of age in Southampton compared with the average of 24I Urban areas, the deaths of infants in various age groups is given below. The deaths of infants in Southampton

The only cause of death of infants that is above the average in Southampton is Premature Birth.

INFANTILE MORTALITY, 1913.

Causes of Death.		Under I week.	I-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 4 weeks.	4 weeks & under 3 months.	3 months & under 6 months.	6 months & under 9 months.	9 months & under 12 months.	Total Deaths under I year.
All Causes—Certified —Uncertified	• • •	74	8	13	12	107 	47	39	30	18	241
Small Pox Chicken Pox Measles Scarlet Fever Whooping Cough Diphtheria and Croup Erysipelas Tuberculous Meningitis Abdominal Tuberculosis Other Tuberculous Diseases Meningitis (not Tuberculous) Convulsions Laryngitis Bronchitis Pneumonia (all forms) Diarrhæa Enteritis Gastritis Syphilis Rickets Suffocation, overlying Injury at Birth Atelectasis Congenital Malformations Premature Birth Atrophy, Debility and Marasm Other Causes	aus		I I	 	3 I	 4 8 3 1 5 4 4 4 59 13 5	3 1 1 2 6 3 8 4 2 1 2 3 3 6 2	I 3 I 2 6 4 7 2 I 2 I I 2 4	4 1 4 6 3 1 1 1 1 1 2 2 2	3 	1 10 6 2 3 3 10 1 25 20 23 3 4 2 3 5 4 9 64 25 11
Totals	• • •	74	8	13		107	47	39	30	18	24I

Nett Births in the Year—Legitimate, 2,842; Illegitimate, 115. Nett Deaths in the Year—Legitimate infants, 219; Illegitimate infants, 22.

BIRTH RATE, DEATH RATE, AND INFANTILE MORTALITY IN SOUTHAMPTON SINCE 1882.

				Average Five Years							
Year.	Birth Rate.	Death Rate.	Infantile Mortality.	Birth Rate.	Death Rate.	Infantile Mortality.					
1882 1883 1884 1885 1886	32.I 34.6 31.7 30.5 30.1	18.3 20.9 16.9 19.0 18.0	131 137 114 146 140	31.8	18.6	134					
1887 1888 1889 1890	31.3 31.3 30.6 28.5	18.7 16.9 16.3 17.5 18.0	145 126 117 129 123	30.6	17.5	128					
1891 1892 1893 1894 1895	31.3 28.6 29.5 30.2 30.4	21.5 19.5 16.0 18.7	148 157 119 155 146	29.8	18.6	145					
1896 1897 1898 1899 1900	30.4 30.4 29.8 29.6 28.3	/·3 :7·3 :19·1 :17·6 :16·6	156 153 178 152 154	29.6	17.6	159					
1901 1902 1903 1904 1905	30.0 29.1 29.4 27.5 26.0	15.7 14.1 14.2 15.1 13.8	124 114 114 133 113	27.6	14.6	120					
1906 1907 1908 1909 1910	26.0 24.3 25.4 25.3 24.9 23.9	13.6 13.6 13.9 12.4 15.2 13.2	108 113 106 79 135 84	24.8	13.7	108					
1912 1913	23.3	12.9	82		and the state of the state of the state of the state of						

MORTALITY FROM ZYMOTIC DISEASES.

The death-rate from diseases usually classified as the chiepidemic diseases, namely: Small Pox, Scarlet Fever, Diphtherienteric Fever, Measles, Whooping Cough, and Diarrhæa are Enteritis, amounted to 0.980 per 1,000 of the population, while is slightly higher than in the preceding year, when the rate woo.938.

The death-rate per 1,000 of the population from the diseases specified above for the past five years is shown in the following table:—

			1909.	1910.	1911.	1912.	1913.
Sn	nall Pox		.000	.000	.000	.000	.000
Sc	arlet Fever	• • •	.043	.017	.042	.017	.016
Di	phtheria		.164	.136	.194	.158	.24I
E	nteric Fever		.086	.085	.025	.066	.048
M	easles		.000	.145	.109	.149	.241
W	hooping Cough		. 362	.094	.151	.291	.080
Di	arrhœa and Ente	eritis					
	under 2 years of	age	.491	.288	1.328	.257	.354
	Total Zymotic						
	death-rat	е	1.146	0.765	1.849	0.938	0.980

THE INCIDENCE OF NOTIFIABLE INFECTIOUS DISEASES.

The total number of cases of infectious disease notified during the year amounted to 1,191. The following is a list of notifiable diseases and the number of cases notified of each disease:—

Small Pox			• • •		I
Cholera		• • •	• • •		0
Plague		• • •	• • •		0
Diphtheria		• • •			357
Erysipelas		• • •			51
Scarlet Fever			• • •		177
Typhus Fever					0
Enteric Fever		• • •			33
Relapsing Fever		• • •	• • •		0
Continued Fever			• • •		0
Puerperal Fever					3
Cerebro-Spinal Me	eningi	tis			0
Poliomyelitis		• • •			0
Pulmonary Tuber		is			464
*Other forms of Tu	iberci	ılosis			105
				I	,191

^{*}Made compulsorily notifiable on and after 1st February, 1913.

The following table shows the number of cases of notifiable disease recorded in the Borough during the past five years:—

DISEASE.	1909.	1910.	1911.	1912.	1913.
Small Pox Scarlet Fever Diphtheria Enteric Fever Continued Fever Puerperal Fever Erysipelas Cerebro-Spinal Meningitis Poliomyelitis Pulmonary Tuberculosis Other Forms of Tuberculosis	222 53 9 92 —	219 208 55 4 67	198 352 20 4 69 —	2 288 192 12 1 5 72 1 — 339	1 177 357 33 3 51 — 464 105
Total	801	553	643	912	1191

All cases of Pulmonary Tuberculosis were made compulsorily notifiable on the 1st January, 1912, and other forms of Tuberculosis on the 1st February, 1913.

Detailed information respecting Tuberculosis is given on pages 31 to 69.

The table which follows gives a comparison of the infectious sickness rates during the year 1913 in Southampton with the average for England, and for the County Boroughs of England per 1,000 of the population.

1,000 of the population			County Boroughs	England.
	So	uthampton.	of England.	0
Small Pox		0.01	0.00	0.00
		I.42	4.26	3.51
Scarice 1 0.02		- 0-	1.48	I.39
Diphtheria	• • •	0 0 =	0.25	0.22
Enteric Fever	• • •	•		0.05
Puerperal Fever	• • •	0.02	0.07	
Erysipelas	• • •	0.41	0.74	0.64
Cerebro-Spinal Fever		0.00	O.OI	0.01
Cerebro-Spinar Lever		0 00	0.02	0.02
Poliomyelitis	• • •	0.00	×	
			6.83	5.84
		5.00	0.03	3.04

There were 2,140 visits and re-visits made to houses in which infectious diseases occurred, and inquiries were made relative to the probable source of infection, and the isolation of the patient. Information was also given concerning the precautions necessary to be taken to prevent the spread of the disease.

In addition, 1,236 visits were made to the homes of persons who had been exposed to infection on ships arriving in the Port.

In connection with school absentees, 745 visits were made where non-notifiable infectious diseases occurred.

Of the cases notified 382 were removed to the Isolation Hospital for treatment.

Sanitary defects were found in 127 houses in which cases occurred.

Particulars respecting each disease are appended:—

SMALL POX.

One case of Small Pox was notified during the year.

The case was that of a man, T.R.H., aged 33 years, and residing in the upper part of the town. The patient had been working in the Docks, but no evidence could be obtained of his having been in contact with Small Pox infection. He was removed to the Hospital Ship and the usual precautions taken to prevent the spread of infection. The case was of a discrete type. The patient had been vaccinated in infancy, and was stated to have been re-vaccinated 13 years before illness.

SCARLET FEVER.

The number of cases of Scarlet Fever notified during the year amounted to 177, being a decrease of III cases compared with total recorded in the previous year.

The number of cases notified was the lowest since 1907. The number of cases notified and deaths resulting from the disease for the past five years were:—

				Cases.	Deaths.	Percentage.
1907	• • •		• • •	165	2	1.21
1908	• • •			536	4	0.75
1909	• • •	• • •	• • •	424	5	I.47
1910			• • •	219	2	0.92
1911		• • •	• • •	195	5	2.56
1912	• • •	• • •	• • •	288	2	0.69
1913	• • •	• • •	• • •	177	. 2	1.13

The cases occurred with about the same frequency throughout the year, and showed no excess in the autumn months. In proportion to the population the disease was most prevalent in Northam and Trinity Wards, and lowest in Banister and Bevois Wards.

The disease was generally of a mild type, two deaths being recorded, giving a case mortality of 1.3 per cent.

One hundred and thirty-eight of the cases notified were removed to the Isolation Hospital for treatment, being a percentage of 78 compared with 81.6 in the previous year, and 88.7 in 1911

In addition to the above cases twenty-three cases of Scarlet Fever from neighbouring districts, and two cases which were landed in the Port, were admitted to the Isolation Hospital during the year, making a total of 163 cases admitted.

Operation for the removal of tonsils and adenoids was performed in 7 cases, or 4.3 per cent. of the total number of cases admitted to Hospital (including cases admitted from other districts).

Several of the cases of Scarlet Fever admitted were suffering from purulent nasal discharge, 24 of the cases admitted being complicated in this way.

In one case, Whooping Cough developed two weeks after admission, the infection having occurred before admission. Measures were taken to prevent further spread of the disease, and no other case occurred.

The methods of treatment and discharge which have been adopted at the Isolation Hospital since 1902 were again carried out during the year, no heed being taken of desquamation in regard to detention in Hospital, but particular attention being given to the condition of the respiratory passages, ears, etc., by special isolation and treatment.

Four "return" cases occurred during the year. Appended are the particulars of each of these:—

8th January to 10th February, lived in the same house with F.K. from 26th February; F.K. developed the disease on 7th March, and was admitted on 10th March.

2.—T.Y., admitted 15th February, and discharged 24th April, had chronic purulent nasal discharge before admission. She submitted to the operation for the removal of tonsils and adenoids, but the nasal discharge continued. She was finally sent home at her parents request, the necessary precautions and the risk involved having been fully explained to them.

Her cousin, A.W., visited her on the day of her discharge, and developed Scarlet Fever on 28th April,

and was admitted on 1st May.

- 3.—This patient, A.W., was discharged on 26th May, and his sister, I.W., showed symptoms of the disease on 11th June, and was admitted on 13th June.
- 4.—Mrs. E.T., admitted 12th September, and discharged 6th November, had chronic nasal polypi, with purulent discharge. She was offered an operation for the removal of the polypi, but refused, although she clearly understood the risk of remaining infectious to others.

Her sister, B.W., had an attack of Scarlet Fever on 29th November, and was admitted to Hospital on 1st December.

The following table gives particulars of cases of Scarlet Fever notified in the Borough, showing the number treated in the Isolation Hospital, the period of detention and the number of "return" cases in each year:—

Year.	Cases notified.	Admitted to Hospital.	Average period in Hospital (days).	No. of "return" cases.	Cases treated at home.
1902	 261	208	48	7	53
1903	 427	353	34	7	74
1904	 113	102	26.7	2	II
1905	 140	123	29.3	2	17
1906	 68	60	28.8	2	8
1907	 165	151	32.6	3	14
1908	 536	378	33.7	5	158
1909	 424	331	38.8	3	93
1910	 219	i83	36.9	0	36
1911	 195	171	34.0	O	24
1912	 288	235	32.0	Ο	53
1913	 177	136	34.0	4	41

DIPHTHERIA

The number of cases of Diphtheria notified during the year amounted to 357. This number is considerably higher than in the previous year, when 192 cases occurred. The total is, however, about the same as in the year 1911, when 352 cases were notified in the fifty-two weeks ending 30th December, compared with 357 in the fifty-three weeks ending 3rd January, 1914.

Thirty deaths from the disease were registered giving a case mortality of 8.4, which is lower than in the previous year, but higher than in 1911, as will be seen from the following table:—

•				Cases.	Deaths.	Percentage.
1906		• • •		262	24	9.16
1907				204	22	10.78
1908				248	16	6.45
1909			• • •	222	19	8.56
1910				208	16	7.69
1911			• • •	352	23	6.53
1912		• • •	• • •	192	19	9.90
1913	• • •	• • •		357	30	8.40
_						

The seasonal incidence of the disease was very marked, the excess being confined to the last three months of the year, during which period 201 cases were notified, reaching their maximum in the first two weeks of December.

The largest number of cases in proportion to the population occurred in Shirley Ward, many cases being notified in that area of small working class property north of Shirley High Street Other wards in which the disease was prevalent were St. Denys Northam, Millbrook, and Portswood Wards. The smallest number of cases occurred in Town, Freemantle, and St. Marys Wards.

The increase in the number of cases notified followed a dry summer, as was the case in 1911, but it is impossible to specify any cause to which the unusual prevalence of the disease was due. In the districts in which the oldest and smallest type of house is found, namely, in the Town and St. Marys Wards the cases were comparatively few in number, especially in the last three months of the year. Every investigation was made as to the origin of each case, but no probable cause could be discovered other than personal infection in some of the cases.

Two hundred and twenty-four of the 357 cases notified were admitted to the Isolation Hospital for treatment, which is equal to a percentage of 62.7 per cent. compared with 78.7 in 1912 and 79.8 in 1911.

In addition to the above, thirteen cases were admitted to the Isolation Hospital from neighbouring districts, and seven cases were admitted that were landed from the vessels which arrived in the Port.

ENTERIC FEVER.

The cases of Enteric Fever notified in the Borough amounted to 33, which is an increase of 20 compared with the year 1912, but is 3 less than the average of the preceding five years

The number of cases notified, and the deaths that occurred amongst cases notified in the Borough since 1901 are given in the following table:—

				Cases.	Deaths.	Percentage of Deaths amongst cases notified in the Borough.
1901	• • •	• • •		106	7	6.6
1902			• • •	123	15	12.2
1903		• • •	• • •	148	19	12.8
1904		• • •	• • •	19	I	5.3
1905		• • •	• • •	34	8	23.5
1906		• • •	• • •	15	5	33.3
1907		• • •		21	4	19.0
1908		• • •		37	4	10.8
1909		• • •		53	7	13.2
1910		• • •		55	9	16.4
1911	• • •	• • •		20	3	15.0
1912	• • •	• • •	• • •	-13	3	23.I
1913	• • •	• • •	• • •	33	6	18.2

The above table does not include the deaths of persons who were landed in the Port suffering from Enteric Fever and who subsequently died from the disease in Hospitals in the Borough. These deaths, however, are included in Table 4 in the appendix.

Six of the cases notified occurred in one family in Northam. The father had been ill for some weeks before the disease was recognised and notified to the Sanitary Authority. After his removal to Hospital five other members of the family developed the disease, having probably been infected by the original case.

Four of the cases had eaten uncooked shellfish (cockles 3, oysters 1) previous to the onset of the disease. Three cases were probably infected in other districts, 7 of the cases were contacts, one case had been working on a ship from which a case of Enteric Fever was removed, and in the remaining 18 cases not evidence could be obtained as to the cause of the disease.

Twenty of the cases notified were removed to the Isolation Hospital for treatment, five were admitted and notified from the Union Infirmary, after the disease was recognised, and three were notified under similar conditions from the Royal South Hants and Southampton Hospital. The remaining five cases were treated at their homes.

Of the six deaths registered three occurred in the Isolation Hospital and three in the Union Infirmary.

In addition to the cases removed to the Isolation Hospital from the Borough II cases were admitted that were landed from vessels which arrived in the Port, and two cases were admitted from neighbouring districts.

The following is a detailed list of the cases which occurred in the Borough during the year:—

REMARKS.		In contact with the above case	Do.	Do.	Nursing above cases	In contact with the above cases	Had been nursing patients suffer-	Had eaten uncooked cockles pre-	74	Dishops waithan	Had been working on board the	Notified after death; unable to	Returned home unwell from Roll-	Stone Camp, Sansbury Fram. Contracted at Templecombe	Notified after death; unable to	get any motination
		:	•	:	•	•	:	•	:	:	:	:	•	•	•	•
WHERE ISOLATED.	Isolation Hospital	Do.	Do.	Do.	Do.	Do.	Royal South	Isolation Hospital	At Home	Isolation Hospital	Do.	Union Infirmary	Isolation Hospital	Do.	Union Infirmary	Isolation Hospital
	:	:	:	•	:	:	:	:	:	•	•	se	:	•	•	•
ADDRESS.	Britannia Road	Do.	Do.	Do.	Do.	Do.	Royal South	Milton Road	Hill Lane	Westgate Street	Cossack Street	St Michael's House	Rochester Street	St James' Road	Millbank Street	North Front
	:	•	•	•	:	•	:	•	:	:	•	•	:	:	•	0 0. 0.
SEX.	M	[I	M	I	I	Ħ	Ţ	M	M	M	M	M	M	M	Ţ	M
	:	•	:	•	:	:	:	•	:	•	•	:	•	•	:	*
AGE.	37	12	H	01	35	∞	22	44	15	25	14	44	1 7 I	5	22	42
	:	:	•	:	:	•	•	•	:	•	•	•	•	*	•	:
NAME	A J.O.	D.E.O.	S.O.	G.O.	J.E.O.	W.D.O.	P.K.	P.E.J.T	R.C.C.	F.C.	G.A.W.	A.C.	A E.K.	E.J.W.	E.J.	E.W.
	:	:	•	:	:	:	:	:	•	:	•	:	:	:	:	•
E .	1912.	13.	13	13	21	14	S	15	9	12	8	7	12	12	26	17
DATE	rg Dec.	1913. Jan. 8			6	Feb.	Mar.	Apl.	May	33	June	Aug.		33	6	Sept
NO.	н	63	3	4	5	9	1/	∞	0	01	II	12	13	14	15	91

ENTERIC FEVER—Continued.

REMARKS.						Nursing case No. 21			Had eaten uncooked cockles previous to illness				Had eaten uncooked cockles pre- vious to illness				Had eaten oysters previous to
	•	•	:	:	•	:	:	:	:	:	•	:	:	:	•	•	•
WHERE ISOLATED.	Isolation Hosqital	Do.	At Home	Do.	Isolation Hospital	Do.	Do.	Do.	Do.	Royal South Hants Hospital	At Home	Union Infirmary	Do.	At Home	Union Infirmary	Isolation Hospital	Royal South
	:	:	:	:	:	:	•	:	:	:	:	:	•	:	Rd.	(h)	. 1
ADDRESS.	Threefield Lane	Do	Do	Do	Northam Road	Do.	Oxford Street	Bond Street	Chapel Street	College Street	Nile Road	Belgrave Road	Endle Street	Princes Street	Mount Pleasant Rd.	Linney's Passage	East Street
	:	:	:	:	:	:	:	:	:	:	•	:	:	:	:	:	:
SEX.	I	Ή	M	[I	M	H	M	M	[I	\mathbb{Z}	Ħ	H	M	Ĩ,	M	M	THA
	:	:	•	:	:	:	:	:	_:	:	•	•	:	:	:	:	
AGE.	7	13	5	4	34	26	29	19	II	21	3	37	58	∞	9	33	40
	:	•	:	•	:	:	:	:	:	•	:	:	•	•	:	•	i
NAME.	E.A.	A.A.	G.A.	E.A.	A.E.M.	A.E.M.	C.S.	J.C.	E.B.	F.H.	M.L.D.	F.A.W.	G.R.	B.F.	W.F.A.	E.L.	EN
	:	:	•	:	•	•	:	:	•	:	:	:	:	:	:	:	
Ē	17	17	20	20	2	22	24	27	27	9 .	17	19	19	27	27	4	C
DATE.	Oct	33	2	33	25	•	33		33	Nov.		5	33	2		Dec.	
NO.	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	

1913 (53 weeks ended 3rd January, 1914).—TABLE showing the number of Cases of Scarlet Fever, Diphtheria, and Enteric Fever, and Deaths from Measles, Whooping Cough, and Diarrhoea occurring in each week, tabulated according to the Municipal Ward in which such Cases or Deaths occurred.

	Town.	St. Mary.	Northam.	TRINITY.	Newtown.	ALL SAINTS.	. Bevois.	BANISTER.	Freemantle.	MILLBROOK.	SHIRLEY.	Portswood.	ST. DENYS.	Borough.
	Cases. Deaths.	Cases. Deaths.	Cases. Deaths.	Cases. Deaths.		Cases. Deaths.	Cases. Deaths.	Cases. Deaths.	Cases. Deaths.	Cases. Deaths.	Cases. Deaths.	Cases. Deaths.	Cases. Deaths.	Cases. Deaths.
Week ending Vearlet Fever.	Scarlet Fever. Diphtheria. Enteric Fever. Measles. Whooping Cough.	Scarlet Fever. Diphtheria. Enteric Fever. Measles. Whooping Cough. Diarrhosa	Scarlet Fever. Diphtheria. Enteric Fever. Measles. Whooping Cough. Diarrhosa.	Scarlet Fever. Diphtheria. Enteric Fever. Measles. Whooping Cough.	Scarlet Fever. Diphtheria. Enteric Fever. Measles. Whooping Cough.	Scarlet Fever. Diphtheria. Enteric Fever. Measles. Whooping Cough.	Scarlet Fever. Diphtheria. Enteric Fever. Measles. Whooping Cough.	Scarlet Fever. Diphtheria. Enteric Fever. Measles. Whooping Cough.	Scarlet Fever. Diphtheria. Enteric Fever. Measles. Whooping. Cough. Diarrhoa	Scarlet Fever. Diphtheria. Enteric Fever. Measles. Whooping Cough.	Scarlet Fever. Diphtheria. Enteric Fever. Measles. Whooping Cough.	Scarlet Fever. Diphtheria. Enteric Fever. Measles. Whooping Cough. Diarrhæa	Scarlet Fever. Diphtheria. Enteric Fever. Measles. Whooping Cough. Diarrheea.	Scarlet Fever. Diphtheria. Enteric Fever. Measles. Whooping Cough. Diarrhosa
January 4	2 _ _ _ _		- 3	_ i _ i _ (_ i _ i		-1-1-1-1-1-					I I			6 3 1 - 2
February I -														2 3 2 — — — — — — — — — — — — — — — — —
" 10	2 1 - - -	- I	1			1		- - - - - -		- - - -	- - - - - -			3 2 1 — — —
November 1 25 November 1 8 8 15 15 22 19 December 6 1 13 13 15 15 15 15 15 15 15 15 15 15 15 15 15						3 1								7 20 3 — I — I 7 15 2 — I I
	2 = = = = =	- I		<u> - - - - - </u>		I I	- 1		1	1 12 27 9				I 6 I — —
Totals	13 14 9 4 - 5	18 25 2 4 - 12	30 40 10 2 1 9	19 22 4 1 — 2	8 20 2 - 2 1	13 19 2	71 202 - 12 5	0 65 106 13 - 12 -	150 147 - 2 1	121 315 - 81 10 7	0 160 725 11 85 - 64	17 27 2 3 1 1	8 47 — 1 1 1	77 357 33 30 10 44
Rate per 100,000 1: of population	10 118 76 34 — 42	140 194 16 31 - 93	255 340 84 17 8 76	206 239 43 11 — 22	94 230 24 - 24 12	143 211 22	71 202 12 39	9 2 2 2 2 2	-33 147 - 23 12	1 323 101 10 1	100 /25 11 05 - 04	190 302 22 34 11 11	92 339 — 11 11 1	42 20/ 2/ 24 0 35



			17714
Total imber of uisances abated.	Enteric Fever.	H: NH::::::::	7
Total number of Nuisances abated.	Diphtheria.	10 13 10 11 11 11 16 16	148
Back yards ıpaved.	Enteric Fever.		
Back yards unpaved	Diphtheria.	::::::::::::::::::::::::::::::::::::::	∞
Roof of ouses lefec- tive.	Enteric Fever.		:
Roof of houses defec- tive.	Diphtheria.	:: 2 H : : : : : H 2 : :	6
cary oins	Enteric Fever.	:::::::::::::::::::::::::::::::::::::::	:
No sanitary dustbins	Diphtheria.	а : а : ш н а : н н н : а	15
ec- ing ack ds.	Enteric Fever.	H : H : : : : : : : : : :	4
Defective paving in back yards.	Diphtheria.	нюююнннн : ю4 : ю	28
ty lls ld ngs les.	Епtегіс Fever.	:: H :: : : : : : : :	н
Dirty walls and ceilings of houses.	Diphtheria.	: шишни : ингни	31
ec- ve ns	Enteric Fever.	:: ан :: : : : : : : : : : : : : : : : :	3
Defec- tive drains	Diphtheria.	a w ∠ w a a w : a 4∞ : a	42
ctive ring roof uses ing walls.	Enteric Fever.	::H:::::::::::::::::::::::::::::::::::	н
Defective guttering under roof of houses causing damp walls.	Diphtheria.	:ню:ннн::ню::	I3
Water Closets dequately upplied th water.	Enteric Fever.		
Water Closets inadequately supplied with water.	Diphtheria.	::: + : + : : : : : : : : : : : : : : :	4
oer of es fied g the	Enteric Fever.	Q401 + 444 : 1 : 1 1 4 :	33
Number of cases notified during the year.	Diphtheria.	41 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	357
Ward.		Town St. Marys Northam Trinity Newtown All Saints Bevois Banister Freemantle Millbrook Shirley St. Denys St. Denys	Total

MEASLES.

The number of deaths from Measles amounted to 30, which is an increase of 12 compared with the preceding year, and 18 above the average for five years. The disease was prevalenduring the first half of the year, but did not assume epidemi proportions.

The first death occurred in the Union Infirmary, 8 death from Measles being recorded in that Institution during the month of February, three being complicated by Diphtheria.

The districts in which the largest number of deaths occurre were Millbrook Ward, 8 deaths; Shirley Ward, 6 deaths.

WHOOPING COUGH.

Ten deaths occurred from Whooping Cough, which is the lowest number recorded since the area of the Borough was extended. The number registered is 25 less than in 1912 and 18 below the average of the past five years. Six of the death were under one year of age.

DIARRHŒA AND ENTERITIS.

There was a small increase in the number of deaths from the diseases classified as Diarrhæa and Enteritis during the year the number recorded being 55, compared with 37 in 1912; the average for the past five years being 79.

The deaths classified by the Registrar-General under the heading Diarrhœa and Enteritis include the following diseases:

	Und	er 2 years.	Aged 2 years and over.	Total
Diarrhœa and Infe	ective			
Enteritis		34	3	37
Enteritis		6	5	II
Gastro Enteritis		4	O	4
Dyspepsia (under 2	years			
of age)				
Colitis			I	I
Duodenal Ulcer			2	2
		44	II	55

The death-rate from all diseases under the heading of Diarrhæa and Enteritis amounted to 0.44 per 1,000 of the population, compared with 0.31 in 1912 and 1.50 in 1911. The death-rate from Diarrhæa and Enteritis under 2 years of age was equal to a rate of 0.35, compared with 0.24 in 1912, and 1.33 in 1911. The deaths from Diarrhæa and Enteritis under 2 years of age was equal to a rate of 14.9 per 1,000 births, compared with 23.4 for England and Wales, and 29.3 for the 96 large towns.

The deaths from these diseases reached their maximum in September, when 23 deaths were recorded.

The largest number of deaths occurred in St. Marys, Northam, and Town Wards, the totals recorded being 13, 9, and 7 respectively.

CEREBRO-SPINAL FEVER AND ACUTE POLIOMYELITIS REGULATIONS, 1912.

No notifications were received under these Regulations during the year.

One death from Cerebro-Spinal Meningitis occurred in the Royal South Hants and Southampton Hospital the case being that of a man aged 21 years, a Lascar coal trimmer on board one of the Transports.

TUBERCULOSIS.

The total number of deaths from all forms of Tuberculosis of persons classified as residents of the Borough amounted to 186, as follows:—

Pulmonary	Tubercu	ılosis		• • •	• • •	150
Tuberculou					• • •	19
Tuberculosi	s of the	Peritoneur	n and	l Intesti	nes	4
, ,	, ,	Spine		• • •		I
, ,	, ,	Hip Joint			• • •	2
,,	"	Skin	• • •		• • •	I
,,	, ,	Kidneys				I
2 *	, ,	Prostate				I
Disseminate	ed Tube	rculosis	• • •			7

186

Six of the deaths from Pulmonary Tuberculosis occurred amongst persons who arrived in the Port from foreign countries and died in the Borough, and who, having no settled residence in England and Wales are included as residents.

The total number of deaths recorded from all forms of the disease is 16 less than in the previous year, Pulmonary Tuberculosis showing a decrease of 10 deaths, and other forms by 6.

The death-rate from Pulmonary Tuberculosis was equal to I.21 per 1000 of the population. This is 0.11 lower than in 1912, and is slightly lower than the average of I.28 for the preceding ten years.

The mortality of males from Pulmonary Tuberculosis showed a decrease when compared with the previous year, but the mortality of females was slightly higher. The death-rates calculated on the estimated male and female population were 1.52 and 0.92 respectively.

Death-rates from Pulmonary Tuberculosis.

•					_	
			۳.	Males.	Females.	Both Sexes.
1901	• • •	• • •		1.76	I.OI	1.37
1902	• • •	• • •		1.77	I.23	I.49
1903	• • •	• • •	• • •	1.50	0.83	1.15
1904				I.62	0.92	1.26
1905			• • •	1.59	0.87	I.22
1906			• • •	1.83	0.95	1.38
1907		• • •	• • •	1.41	0.84	I.II
1908			• • •	I.42	0.91	1.15
1909			• • •	1.85	0.91	1.36
1910		• • •		1.75	0.76	1.23
1911		• • •	• • •	2.01	1.17	1.58
1912		• • •	• • •	1.81	0.88	I.33
1913	• • •	• • •	• • •	1.52	0.92	1.21

The percentage of deaths from Pulmonary Tuberculos during the year to cases notified during the same period appended with the comparative figures for 1912:—

		Males.	Females.	Total.
1912		$5^2 \cdot 5$	39.6	47.2
1913	 • • •	38.7	25.8	32.3

Of the cases dying in 1913 the following table shows the years in which the notifications were received. Compulsory notification of all cases of Pulmonary Tuberculosis first came into operation on the 1st January, 1912:—

1909	• • •	• • •		• • •	• • •	3
1910	• • •	• • •	• • •			2
1911	• • •	• • •		• • •		IO
1912	• • •			• • •		43
1913	• • •	• • •				66
Not no	otified		• • •	• • •	• • •	26
						150

The mortality from tuberculous diseases other than pulmonary was equal to a rate of 0.29 per 1000 of the population, and is the lowest death-rate from non-pulmonary tuberculosis yet recorded in Southampton, and compares favourably with the average. 0.44, for the past ten years. The decrease was chiefly due to the diminution in the number of deaths recorded from Tuberculosis of the Peritoneum and Intestines, only 4 deaths being recorded, compared with an average of 16 during the preceding ten years.

Table showing death-rates, per 1000 of the population, from Tubercular Diseases, from 1873 to 1913, grouped in periods of five years:—

	Pul	lmonary.	Other Tubercular Diseases.	Total Tubercular Diseases.
1873-1876 (4 years)				2.79
1877-1880 (4 years)		2.11	0.68	2.79
1881-1885 (5 years)		1.86	0.63	2.49
1886-1890 (5 years)		I.72	0.50	2.22
1891-1895 (5 years)		1.56	0.68	2.24
1896-1900 (5 years)		I.49	0.57	2.06
1901-1905 (5 years)		1.30	0.51	1.81
1906-1910 (5 years)		I.25	0.41	1.66
1911		1.58	0.43	2.01
1912		1.33	0.35	т.68
1913		I.2I	0.29	1.50

The year 1913 will be remembered as a landmark in the history of the administrative control of Tuberculosis. It marks the introduction throughout the country of a special scheme in the great fight against Tuberculosis.

Southampton has been in front of this movement, the Corporation having had a complete scheme in full working order at the end of 1912. The year 1913 is the first during which the complete scheme has been in full work for the whole year, and, therefore, this Report will form the foundation on which future Reports will be based and with which they will be compared. Since 1908. the Local Government Board has from time to time issued Regulations as to the notification of Tuberculosis, each set of Regulations went a step further. The notification of cases occurring in Poor Law practice became obligatory on 1st January, 1909. The duty to notify was extended on 1st May, 1911, to cases occurring in Hospital practice. On 1st January, 1912, cases of Pulmonary Tuberculosis in all classes of practice became notifi-This gradual introduction of the notification of Tuberculosis became complete on 1st February, 1913, when all forms of Tuberculosis, whether Pulmonary or otherwise, became notifiable. The order of the Local Government Board which enforced the compulsory notification of all forms of Tuberculosis from 1st February, 1913, revoked the previous three sets of Regulations, and modifications were introduced which experience had shown to be desirable. These modifications may be summarised as follows:--

- (I) The practitioner is not required to notify if he believes the patient has already been notified to the Medical Officer of Health of the district in which he resides.
- (2) School Medical Inspectors are required to notify new cases weekly.
- (3) Medical Officers of Poor Law Institutions and Approved! Sanatoria are required to notify weekly all patients; admitted and all patients discharged to the Medical Officer of Health of the district to which they belong.
- (4) The diagnosis leading to notification must be based upon evidence other than that derived solely from Tuberculin tests.
- (5) The confidential character of the notifications is more strongly emphasised.

(6) The Notification Form has been extended to include the usual place of residence and the occupation of the patient.

The following table shows the number of cases notified since the Regulations of 1908 came into force until their revocation on 31st January, 1913:—

	I		w Regulations. Re-notified.		l Regulations. Re-notified.		egulations. Re-notified.
1909	• • •	216	185				
1910		146	205				
1911		II2	129	55	4		_
1912	• • •	74	123	37	IO	228	26
1913		7	8	6	I	20	I

The new Regulations came into operation on the 1st February, 1913, and the following table gives a complete return of cases notified during the year 1913.

Summary of Notifications received during the Year 1913 (53 Weeks ended 3rd January, 1914).

Regulations	Primary.	Re-notifications.	Total.
1908	 7	8	15
1911 (Hospitals)	 6	I	7
1911	 20	I	21
1912 (Form A)	 527	65	592
,, (Form B)	 9	2	II
,, (Form C)	 	198	198
,, (Form D)	 	183	183
	*569	458	1027

^{*} Pulmonary, 464; Non-Pulmonary, 105.

As will be seen from the above table, of the total of 1,027 cases notified during the year 569 were primary notifications. Of these 464 related to Pulmonary Tuberculosis, and 105 to other forms of the disease. The localisation of the disease as specified on the notification certificates is classified in the following table:—

NUMBER OF PRIMARY NOTIFICATIONS RECEIVED DURING THE YEAR 1913 (53 WEEKS ENDED 3RD JANUARY, 1914).

JANUARY,	19	14).		
Localisation of Disease.		Males.	Females.	Total.
Pulmonary. Lungs Lungs and Larynx "Bronchial Glands "Pleura "Meninges of Brain "Intestines "Peritoneum "Cervical Glands "Glands of Abdomen "Kidneys "Skin of Face Larynx Total Pulmonary		223 2 I 1 2 3 I 2 	213 5 I I I 2 I 1 2 I 2 1 2	436 7 1 1 3 1 4 3 3 2 1 1
Localisation of Disease.		Males.	Females.	Total.
*Non-Pulmonary. Bronchial Glands Meninges of Brain "" and Peritoneum Intestines		 I I	5 6 2 2 1 1 11 1 5 1 5 2 1	10 14 2 4 9 3 1 27 1 1 3 7 1 1 8 1 3 1 1 5 2
Total of Primary Notifications— Pulmonary Non-Pulmonary	• • •	E 77	48 229 48	105 464 105
		292	277	569

^{*}The notification of Non-Pulmonary Tuberculosis came into operation on 1st February, 1913.

The following table shows the age and sex incidence of the disease. The numbers for each sex follow each other very closely in the age groups. The statistics, however, are too few at present to draw any conclusions as to the comparative prevalence of the disease at different ages in the sexes. The total notifications for the sexes differed very slightly, but the mortality amongst males was considerably higher. (See Page 32.)

PRIMARY CASES NOTIFIED DURING THE YEAR 1913 (53 WEEKS ENDED 3RD JANUARY, 1914), TABULATED ACCORDING TO AGES AND SEX.

	o to I	to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 and up- wards.	Total.
Pulmonary. Males Females	• • •	4 6	23 25	2 I 24	15 15	2I 29	63 55	47 41	27 18	12	2 4	235 229
Total of Pulmonary	•••	10	48	45	30	50	118	88	45	24	6	464
Non-Pulmonary. Males Females	5 1	16 6	22 18	5 7	3 4	5	2 4	3 I	I 2	• • •	• • •	57 48
Total of Non-Pulmonary	6	22	40	12	7	5	6	4	3		• • •	105
Total all forms of Tuberculosis	6	32	88	57	37	55	124	92	48	24	6	569

The following table has been drawn up in the Form suggested by the Local Government Board:—

SUMMARY OF NOTIFICATIONS DURING THE PERIOD FROM IST FEBRUARY, 1913, TO-THE END OF THE WEEK ENDING ON THE 3RD JANUARY, 1914.

														-					A.T. 1	of Motifies
				Z	umb	er o	f No	tific	atio	ns or	Number of Notifications on Form A.	m A.			Num	ber o	of Notific Form B.	Number of Notifications on Form B.	Number tions or	Number of Notifications on Form C.
Age Periods.				<u> </u>	rim	ary	Not	ifica	Primary Notifications.				Total notifications (i.e., including		Primary Notifications.	Primary		Total notifications (i.e., including cases previously	Poor Law Institu-	Sanatoria.
	to r	t to	0 1 5 10 15 to to to to to 1 5 10 15 20	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 6 to 65 w	65 & up- wards	Total	notified by other Doctors.		Un- to der 5 10	to to 15	Total	notified by other Doctors.	tions.	
Pulmonary—											(1	9,7		,		,0	61	20	IOI
Males	:	3	21	20	13	21	55	47	24	II	61	217	0 42		1		1	C	9	× v
Females	:	9	18	21	13	29	51	37	18	OI	3	206	238		5	н	9	×	0	0
Non-Pulmonary-																				
Males	5	91	22	5	3		23	3	н		1	57	09	Beautine and design of the second	1					01
es	H	9	17	7	4	2	4	Н	73	1		47	48		н		н	н		Н

The social position of the primary cases notified is appended. The largest number come under the heading of "Labourers," amongst whom the mortality from this disease is high.

SOCIAL POSITION OF NOTIFIED CASES.

Position in Life.	Males.	Fema	ales.	Son	Daughter	Total.
Position in Life.	males.	Wife or Widow.	Single (Adults).	of	of	Total.
Army Captain Army Pensioner Baker Barman or Barmaid Blacksmith Boot Repairer Boiler Maker Bricklayer Bilger Butcher Butler Carman Carpenter Carpet Worker Chef Chaffeur Charwoman Civil Assistant Clergyman Clerk Coal Porter Coal Merchant Commercial Traveller Companion Confectioner Coppersmith Collector Crane Driver Dentist Dispenser Domestic Servant Draper Dressmaker or Milliner Dock Foreman Engineer Errand Boy Factory Foreman French Polisher Furniture Remover Gardener Gas Fitter or Worker General Dealer Hairdresser Hammerman Hawker House Furnisher Insurance Agent Interpreter Iron Moulder Labourer Laundress	I	I	I I I I I I I I I I I I I		3 I	1 6 6 6 4 1 2 6 4 1 2 1 1 1 7 1 2 3 4 3 1 3 8 7 1 7 3 1 3 2 1 1 2 2 8 1 6 1 9 3 2 1 2 4 5 7 1 3 5 1 5 1 1 1 2 1 3

SOCIAL POSITION OF NOTIFIED CASES—(Continued.)

	74.3	Fema	ales.	Son	Daughter	Total.
Position in Life.	Males.	Wife or Widow	Single (Adults)	of	of	Total,
Licensed Victualler	I	3		I	ı	6
Lodging House Keeper	-	2	-	I	_	3 I
Milk Purveyor	I I	_		_		I
Miner Motor Engineer	2		_	I	I	4
Musician	I				I	2
Nurse		-	2			2
Ostler	I		_	_		1 6
Painter	2 I	I	_	3		I
Pattern Maker Plumber	2	2	_	I	2	7
Police Constable				2	_	2
Postman	I	I		2	I	5
Postmaster	2			2	I	2 7
Porter (Shop) Printer	3 2	2				4
Railw'y Carriage Clean'r		ī		_		I
" " finisher	I			_		I
", Guard …	_				I	I
" Porter … Shunter …	_		_			I
Salvation Army Super-	1					
intendent	_		—	I		I
Seaman		17	_	8 I	II	48
School Teacher Attend'ce Officer		I	2	I		I
Ship's Captain					_	I
", Barber			. —		2	2
" Butcher …		I			2	3
" Carpenter		ī				3
" Cook " Engineer …	-	_		I		2
" Fireman	2					3
" Printer	. I			_	2	I 15
" Steward		2 2	I	3		2
Shipwright Shoeing Smith	-					I
Shop Assistant	4	I	4	I	_	10
Stevedore		I				3 2
Stonemason		1	_	ī		I
Sweet Manufacturer Tailor	2	2	_		I	6
Telegraphist		I	_	-	_	I
Tinsmith	. I	I		I		3 2
Tram Conductor	-		3			4
Waiter or Waitress Warehouseman	-	I	3			2
Wine Merchant		I				I
No occupation	-	3 6	7 6	7.0	7	10 34
Occupation unknown	3	6	0	12	7	- 34
Total .	197	115	68	95	94	569

When investigating the cases notified enquiry was made as to the birth-place of each individual. This information has been grouped into the districts of the Municipal Wards, and may be compared with the cases notified and deaths occurring in each Ward given on page 43. It will be noticed that nearly half of the Pulmonary cases occurred amongst persons who were not natives of the Town.

PLACE OF RESIDENCE AT BIRTH OF CASES NOTIFIED DURING THE YEAR.

Ward.			P	ulmonary.	Non-Pulmonary.
Town			• • •	30	5
St. Mary's				33	5
Northam				35	IO
Trinity		• • •		17	5
Newtown			• • •	12	5 5
All Saints	• • •	• • •		8	5
Bevois	• • •			12	7
Banister			• • •	4	I
Freemantle	• • •			4 8	I
Millbrook				8	2
Shirley				II	5
Portswood				9	2
St. Denys		• • •		13	7
Outside the	Boro	ugh	• • •	220	20
Unknown		• • •		44	25
				464	105
					district district control

Of the notified Pulmonary cases living outside the Borough-

183 were born in other districts in England;

I was born in each of the following places:—South Africa, Jersey, Aden. Finland, Guernsey, Sweden, Demerara, Italy, and Russia.

In 44 instances the birthplace of the patient could not be liscovered.

The cases residing in Common Lodging Houses at the time of notification numbered 23, seven being in the Municipal Lodging House and 16 in other Common Lodging Houses.

The number of patients living in one-room tenements at date of notification was 24.

The following table shows the case-rate and death-rate from Tuberculosis in each of the Municipal Wards, and is valuable in showing the prevalence of the disease in each district during the year.

The case-rate during the year is unexpectedly highest in the Portswood and Bevois Wards, followed by Northam and Town Wards. The mortality was highest in Town, Portswood and St. Mary's Wards. However, as mentioned in last year's Report considerable variation always occurs in the number of cases notified or deaths occurring in a small district, and reliable comparisons are only possible when spread over a number of years.

Non-Pulmonary Tuberculosis in each Municipal Ward during the year 1913 (53 weeks ended INDLE Snowing cases, case-rate, deaths, and death-rate per 1,000 living from Fulmonary and 3rd January 1914) :--

	al.	Rate	2.45 2.10 1.62 1.20 0.83 1.10 1.55 0.65 1.03 1.50	1
	Total.	Number	29 27 19 11 10 13 5 18 8 8 8 21 9 186	
rhs.	Non-Pulmonary.	Rate	0.08 0.78 0.51 0.11 0.47 0.12 0.12 0.12 0.13 0.32	
DEATHS	Non-Pul	Number	10 66 11 11 11 13 13	1
	Pulmonary.	Rate	2.37 1.32 1.11 1.09 0.36 0.99 1.07 0.65 0.98 1.73 1.90 1.03	1
	Pulme	Number	28 17 13 10 13 17 17 17 17 17 150	
	al.	Rate	5.70 4.73 6.10 3.45 4.24 4.16 6.19 2.11 4.22 3.03 6.55 5.17	
	Total.	Number	67 60 70 31 33 35 16 16 34 44 44	
ES.	monary	*Rate	0.946 0.946 0.947 0.955 0.956 0.933 0.933 0.933 0.933	*I.14
CASES	Non-Pulmonary	Number	10 10 10 8 11 2 4 4 4 11 105	
	nary.	Rate	3.73 3.24 3.25 3.20	2.64
	Pulmonary.	Number	62 50 49 40 14 40 33 33 40 40 40 40 40 40 40 40 40 40	
	Ward.		1. Town 2. St. Marys 3. Northam 4. Trinity 5. Newtown 6. All Saints 7. Bevois 8. Banister 9. Freemantle 10. Millbrook 11. Shirley 12. Portswood 13. St. Denys 13. St. Denys	England and Wales

*The notification of cases of Non-Pulmonary Tuberculosis came into operation on the 1st February, 1913; the rates are

calculated as an annual rate.

Measures Prophylactic and Curative Adopted for Dealing with Tuberculosis.

GENERAL ARRANGEMENTS.

The scheme for the treatment and prevention of Tuberculosis was fully described in the last Annual Report, and has been carried out in detail throughout the year.

Although in certain cases careful adherence to routine procedure may be unnecessary for the satisfactory treatment of individual patients, this methodical adoption of routine is absolutely essential if the records are to be of any help in future years, and if a correct estimate of the value of the work is to be made.

From the inception of the scheme the aim has been to provide treatment not only for insured persons under the National Insurance Act, but for their dependents as well as for all other inhabitants of the Borough requiring it.

The Dispensary forms the centre from which all efforts for treatment and prevention are directed. All cases are dealt with in the first instance at that Institution, and a decision made as to what steps for treatment, prevention and education are indicated.

The Dispensary is open every week-day for observation, diagnosis and treatment, and, in addition, it is open on two evenings a week to meet the convenience of those patients requiring treatment who are able to follow their occupation.

Any patient recommended by a doctor is accepted for treatment if suitable. The medical practitioners of the town can also refer any patient to the Dispensary for diagnosis. Specimens of sputum can be submitted to the Local Authority for examination for tubercle bacilli by any local doctor free of charge.

The amount of work carried out during the year is shown in the following tables:—

RECORD OF DISPENSARY WORK FOR THE YEAR 1913.

New Patients—			
Insured	• • •	• • •	172
Dependents	• • •	• • •	209
Others	• • •		71
			452
			43

Visits of Patien	s under	Observatio:	n
------------------	---------	-------------	---

Insured		• • •	1141
Dependents	• • •	• • •	220I
Others	• • •	• • •	438
			3780

Visits of Patients under Treatment-

Insured		 2911
Dependents		 3195
Others	• • •	 793
		6899

Visits paid by Health Nurse to Homes of Tubercular patients—

Insured		• • •	1322
Dependents		• • •	2225
Others	• • •	• • •	1227
			4774

RECORD OF SANATORIUM WORK FOR THE YEAR.

	Insd.	Dep.	Others.	Totals.
Patients remaining in Sanator-		-		
ium on January 1st, 1913	IO	8	2	20
Patients admitted during 1913		51	32	195
Patients discharged during 1913	98	44	24	166
Patients died in Sanatorium		3	2	9
Patients in Sanatorium on				
January 3rd, 1914	24	II	5	40

Average duration of stay in Sanatorium of each		
patient	71	days
Number of sputum examinations undertaken for		
medical practitioners in the Borough	• • •	. I20

SPECIAL ARRANGEMENTS WITH THE SOUTHAMPTON INSURANCE COMMITTEE.

During the year the Corporation has carried out the Instiutional and Dispensary treatment of insured persons on behalf of the Insurance Committee. Patients requiring Sanatorium or Dispensary treatment have been provided for in the Institutions of the Local Authority, and those under Domiciliary Treatment have been seen every three months by the Tuberculosis Officer in consultation with the Panel Doctors.

The Medical Officer of Health is the Medical Advisor to the Insurance Committee on matters relating to Tuberculosis, and has presented throughout the year a monthly report on all insured patients applying for or receiving Sanatorium benefit. These reports contain the diagnosis, prognosis and recommendations as to the special form of treatment indicated in each case from time to time.

During the year under review, 145 insured patients applied for Sanatorium benefit. From the above table it will be seen that 10 insured persons were in the Sanatorium at the beginning of the year, 112 were admitted during the year, 98 were discharged, 4 died in the Sanatorium, and 24 were still in residence at the end of the year.

The table on Dispensary work shows that of the new patients are were insured, although only 145 applied for benefits. This is accounted for by the fact that a large number of insured patients were sent by doctors for diagnosis, and some of these were

found to be non-tubercular.

It will be seen that about 40 per cent. of the new patients were insured, 30 per cent. of the visits for observation were made by insured persons, and over 42 per cent. of the Dispensary treatment was in connection with insured patients. Over 50 per cent. of the patients admitted to and discharged from the Sanatorium were insured. The number of insured patients transferred to Domiciliary Treatment during the year was 41, and 28 were still under this form of treatment at the end of the year

It is very satisfactory to be able to report that no real difficulties have arisen during the year. In fact, the very smooth working with patients, general practitioners, the hospitals and the Insurance Committee has been one of the most satisfactor.

features of the scheme adopted by the Corporation.

In the earlier conferences between the Health Committee of the Corporation and the Insurance Committee it appeared the administrative difficulties between the two bodies might arise but a satisfactory working basis was finally found and is not being carried out to the apparent satisfaction of both authorities.

Perhaps the main indication that the scheme has met wit the approval of the local doctors is the fact that during the firyear no fewer than 81 private and panel patients were sent the Dispensary by the medical practitioners for an expert opinion on diagnosis. RRANGEMENTS FOR SUPERVISING DOMICILIARY TREATMENT.

Insured Patients.

The duties under this heading are carried out according to he terms of the General Order issued by the Local Government Board, on 26th July, 1912. The provisions of this General order constitute quite a new departure for Public Health Authories; for the first time Officers of a Local Authority are now alled upon to supervise the treatment of patients by general ractitioners, and to act as consulting officers in regard to these atients. It was obvious that friction might arise in carrying ut these duties, therefore, it was deemed prudent to develop ne necessary work under the General Order in a cautious nd tactful manner. The work was quietly started during the ear, and an effort was made to demonstrate to the doctors nat as far as the Local Authority was concerned, the intention as to be helpful to the practitioners in carrying out their treatlent rather than to be dictatory. In this way the work has now eveloped into the full scheme of supervision and consultation required by the General Order. There has been an entire psence of friction and, in fact, the Tuberculosis Officer finds the onsultations to be of the greatest value, for they have opened up umerous opportunities of explaining the Municipal scheme to he doctors, and of enlisting their support, assistance and sympathy hich add greatly to the success of the local authority's efforts.

During the year 41 insured people were recommended to the surance Committee for Domiciliary Treatment, and 28 still mained under this form of treatment at the end of the year. ach case under Domiciliary Treatment has been seen every ree months at his home, in consultation with the panel doctor, the Tuberculosis Officer. The doctors also submit a quarrly report to the Tuberculosis Officer concerning the patient's indition, progress, behaviour in carrying out treatment, &c. addition to these quarterly reports the practitioners keep a onthly chart for each patient, these charts contain a daily cord of the temperature, pulse, and other symptoms. They so constitute a record of the treatment given and the visits and by the doctors.

The number of patients under Domiciliary Treatment has en comparatively small owing mainly to the fact that the puthampton Municipal scheme has been so complete that the ajority of patients who come under the Insurance Act could treated either at the Dispensary or in the Sanatorium. This umber, however, is bound to increase by reason of cases finishing eir course of Sanatorium and Dispensary treatment.

Apart from the money paid to the Corporation, the Insurance Committee has laid aside £150 per annum for the provision of extra nourishment for patients under Domiciliary Treatment.

The nourishment provided generally takes the form of new laid eggs and milk, and is supplied to patients on the recommendation of the Medical Officer of Health. Before a patient is recommended for extra nourishment his prospects, as well as home and financial conditions are carefully investigated. The help is intended to act as a measure of treatment, and it is important to remember that the money was not provided for the relief of poverty; therefore, in each case a decision has to be made as to whether the patient should be assisted by the Insurance Committee or advised to apply to the Poor Law Authority. It is often difficult to make a distinction, for those applying for extra nourishment are frequently patients who appear entitled to parish relief.

When it is decided to give assistance, an order is sent to a local tradesman requesting him to leave eggs and milk daily at the patient's house. In this way, the appearance of charity is avoided, and except for the fact that the monthly accounts are not paid by the patient it is impossible for anybody to know that the patient is not buying the articles supplied.

Not only in Domiciliary Treatment, but in every other branch the patients are assured that they are entitled to the treatmenthey receive. In addition to impressing this fact, an attemptis made to gain the confidence and co-operation of the patients Many may consider that such methods may interfere with proper control over patients, but experience shows that this view is fallacy. A very human relationship between the staff and the patients is essential, as it permits the officers to enter more closely into the habits of the patients and leads to opportunitie for friendly talks which do much to improve the hygienic conditions under which the patients live.

Non-Insured Patients.

For these patients no scheme for Domiciliary Treatment similar to that for insured persons is in operation, and in factors such scheme has been suggested by the Local Government Board. Possibly this may come later, and in Southampton will it is believed, be appreciated by patients and doctors alike.

There are many uninsured patients discharged from the Sanatorium, after an educational course, who return to the homes under their own doctors. Although no Domicilian

supervision is aimed at, the Tuberculosis Officer is always willing to interview the doctor, or visit the patient at home in consultation with the doctor if he requests it.

Where it is agreeable to the medical practitioner this is done, and any particulars as to treatment already given or indicated, is freely offered.

Co-operation with Hospitals, School Clinic and Special Institutions.

HOSPITALS.

Throughout the year cases under the Municipal scheme requiring hospital treatment have been sent by the Medical Officer of Health with a special letter to the Royal South Hants and Southampton Hospital or the Southampton Free Eye Hospital; all these cases have been attended to, and in many of them the Hospital Surgeons have kindly forwarded a report to the Dispensary. Quite a large number of the patients coming under Municipal treatment are cases transferred from the Hospitals.

SCHOOL CLINIC.

The School Clinic was opened under the Local Authority at the end of 1913. During 1911, when the Health Committee was looking for suitable premises for the purpose of a Tuberculosis Dispensary, the possibility of establishing a School Clinic in the near future was borne in mind. The Board of Education was approached, and it was found that there would be no objection to the Tuberculosis Dispensary and School Clinic being housed on the same site, providing that the entrances to the Dispensary and School Clinic were separate, and that the two departments were more or less independent.

The Committee, therefore, purchased the large double-fronted house at I, East Park Terrace, in which both the Dispensary and School Clinic are situated. The entrance to each is separate, and indeed each is approached from a different street.

The advantages are many, and allow such co-operation and co-ordination of effort that the best possible results are likely to be attained.

It must be remembered, that as far as school children are concerned, the Dispensary is really a sub-division of the Clinic for the treatment of Tubercular children, and, moreover the examinations at the Dispensary reveal conditions which require treatment at the Clinic. Thus each department becomes a feeder

of the other, and their close proximity has already proved to be of the greatest value, for it is surprising how frequently it has been necessary to transfer cases from one department to the other for an opinion or for treatment.

SPECIAL INSTITUTIONS.

It is pleasing to report that the Queen's Jubilee Nurses are always willing to nurse and dress cases referred by the Tuber-culosis Officer and during the year a number of cases have been dealt with in this way.

Beyond referring cases to the Jubilee Nurses, no definite attempts at co-ordination with special institutions have yet been made.

It is, of course, realised that the Local Authority does not fully supervise the treatment and care of all cases for the whole of their lives. This is the ideal plan, and would require an elaborate scheme of care committees.

It has been decided to defer the inauguration of Care and After-Care Committees until the Local Authority can see how far its present arrangements can cope with the disease in the Borough.

DIAGNOSTIC METHODS AND NUMBER OF CASES DIAGNOSED.

The usual method of onset of Pulmonary Tuberculosis, particularly among the working classes, is one of such a nature that the disease has often caused much destruction of lung tissue before the assistance of a physician is enlisted. There is generally in such cases a history of previous illness, probably bronchitis, a severe chill, influenza or pleurisy, and the patient will state that from the time of this illness he has not been very well, or has been subject to a cough, or in fact, has never been the same.

It is in the early stages following such lowering and depressing illnesses, and from which the patient does not readily recover, that the growth and development of Tuberculosis so frequently commences, and it is at this time when it is of such vital importance for a definite diagnosis to be made.

It has become more and more recognised that this disease, so much feared in days gone by, can be fully cured in a clinical sense if it is recognised and treated in the early stages. Consequently, the need of methods for the early recognition of Tuberculosis has made itself felt, and thus not only have the older methods of diagnosis become more elaborately worked out, but new ones have been added.

Each patient is carefully examined in every necessary way. In addition to obtaining a full family and clinical history and to making a careful physical examination of the chest, abdomen, etc., every patient is examined under the X-Rays; with very few exceptions an X-Ray photograph of each chest is taken. Where available the sputum is examined for tubercle bacilli by an ordinary smear method or by the anti-formin method; if necessary several careful examinations are made. Every specimen of sputum is examined for albumen and the percentage present is calculated. Von Pirquet's test and the Quanti-Von Pirquet test are applied in every case. Finally, but only in cases where a diagnosis is not definitely settled, the subcutaneous tuberculin test is performed if there are no contra-indications.

In this way, a case is under observation on an average seven to ten days before a definite decision on diagnosis, prognosis, and line of treatment is determined; but in many cases this period of observation extends to three or four weeks, especially when a careful study of the temperature records is needed in order to decide whether the disease is active or latent.

Diagnosis is undertaken at the Dispensary in all cases except those presenting difficulties. Such difficulties generally arise from the patient presenting incorrect or unsatisfactory temperature or other records. These patients, which are few, are admitted to the Sanatorium, where more complete control and closer observation are possible.

TABLE SHOWING THE NUMBER OF DIAGNOSES MADE DURING 1913, AND THE RESULTS OBTAINED.

	Found to be from		Found	
	Pulmonary Tuberculosis.	Non- Pulmonary Tuberculosis.	to be Non- Tuberculous	Totals.
Previously notified cases Suspected cases, other than house contacts, found by members of Health De-	216	3	13	232
Sent by School Medical	36	2	21	59
Officer for Diagnosis bent by Local Medical Prac-	24	0	16	40
House contacts	66	I 0	14 10	81 40
Totals	372	6	74	452

One hundred and seventy-two insured patients were examined for diagnostic purposes during the year, and of these 145 applied for Sanatorium benefit. In each case thus applying a special recommendation on prognosis and line of treatment was presented to the Insurance Committee from time to time. Further recommendations on these patients have been made when necessary. In all, 253 recommendations were made in 1913, and the Committee's sanction was given in every case.

When a doctor sends a case for an opinion, a written report is forwarded to him when the diagnosis is complete.

After receiving the report, the doctor may, and often does, refer the case to the local authority for treatment if Tuberculosis has been discovered.

PARTICULARS OF SPECIAL FORMS OF TREATMENT AND NUMBERS TREATED.

As in diagnosis, treatment is carried out as far as possible on a definite plan so that the results can be correctly summarised at the end of the year.

With the accommodation available under the Municipal scheme, it is found that the best results are obtained by dividing he treatment into the following six classes.

1) Dispensary Treatment.

This entirely ambulatory fo m of treatment is utilised for non-febrile patients with satisfactory home conditions who are careful in following the advice given on hygiene.

Tuberculin is given in a large number of these cases.

After .5 c.c. P.T.O. is reached, the patients attend one weekly until the dose becomes I c.c. Albumose-free Tuberculi is then administered until a dose of .5 c.c. is reached. If furthe treatment should be needed Sensitised Bacillary Emulsion given in increasing doses up to .5 c.c. It is found that large doses than these are not usually necessary.

In addition to tuberculin, cod liver oil, medicines and inhaltion mixtures are dispensed to patients when indicated.

RECORD OF NUMBER OF PATIENTS UNDER DISPENSARY TREAT-MENT DURING 1913.

Pulmonary Non-Pulmonary

	1	'ulmonary.	Non-Pulmonary.
Number of cases under treatment	on	•	,
January 1st, 1913		47	Ο
New cases treated (i.e., the number	of	.,	
new dossiers commenced)		304	3
Cases transferred from Sanatorium		163	3
Cases transferred from Domicilia	arv	5	<i>J</i> .
Treatment	~- 5	Т	\bigcirc
Cases transferred to Sanatorium	•••	TO2	3
Cases transferred to Domiciliary (Insur		192	J,
or otherwise)	ıcı	60	
Cases who have finished treatment a	nd	00	~
are now under general supervision		70	~
Cases lost sight of	• • •	19	
Total and Dianage T	,		
Total under Dispensary Treatme	nt,		
January 3rd, 1914	• • •	174	2

(2) Sanatorium Treatment for Four Weeks followed by Dispensary Treatment.

Those patients receiving this class of treatment fall into two main groups:—(a) non-febrile cases requiring a thorough hygienic education before ambulatory treatment is likely to be successful, and (b) cases in which difficulty is experienced in commencing tuberculin treatment owing to the unreliability of temperature records, or the impossibility of controlling the patients and securing adequate rest after injections.

(3) Sanatorium Treatment for Eight Weeks followed by Dispensary Treatment.

This form of treatment is prescribed for (a) fairly well-marked cases with good prospects of return to working capacity after appropriate treatment, and (b) febrile patients with good prospects.

(4) Sanatorium Treatment for Eight Weeks followed by Domiciliary Treatment.

Those placed under this class of treatment are patients with a bad prognosis in whom relief of symptoms is all that can be hoped for. Residential treatment, with the educational facilities it affords, is necessary because these patients may live for months or years, and they are a great source of danger to others unless they carefully adopt measures to prevent the spread of infection.

(5) Domiciliary Treatment.

Patients are recommended for this form of treatment when they have no prospects and are too ill to benefit by educational treatment in a Sanatorium, or when such would be useless owing to probable death within a short time. Also hopeless cases in good homes, where there is no need for education, are often placed in this class.

(6) Sanatorium Treatment for an Indefinite Period.

Many hopeless cases live under very unsatisfactory conditions, and often in overcrowded houses. They cannot benefit by treatment, but they are a great danger to those around them; possibly children may sleep in the same bed. Such patients are often admitted to the Sanatorium for isolation purposes and nursing, and may remain there till death. Many patients in this class gain admission to the Shirley Warren Infirmary.

Although the above is a rough classification of the various forms of treatment, modifications are frequently necessary. Some patients refuse residential trea ment owing to ignorance of the favourable life it is possible to lead in a Sanatorium. In other cases the length of stay in the Sanatorium may be reduced or increased according to the progress made. The average length of stay of the 195 patients admitted to the Sanatorium in 1913 was 71 days; therefore, it is apparent that it is more usual to extend the period of tay in the Sanatorium than to reduce it. When a patient is apparently doing well the tendency is to increase his time in the Sanatorium as far as possible so as to give him the best possible chance of recovery.

The rules at the Sanatorium in regard to diet, rest, exercise,

etc., are much the same as in other similar institutions.

In suitable cases, tuberculin is administered. P.T.O. is the preparation principally used, but as the patients are under constant control and observation a much wider variety of tuber-culins can be used than is possible at the Dispensary.

The inhalation of antiseptic solutions such as cresote, carbolic acid, and iodine is prescribed in many cases. Sheep's serum has been administered during the year in tablespoonful doses three times a day. Owing to the difficulty in obtaining large quantities of the serum, it has not been possible to prescribe it in many cases at a time.

Each case, of course, receives appropriate medicinal treat-

ment.

It cannot be maintained that the usual length of stay in the Sanatorium is sufficient to effect a cure, and the Dispensary must be relied upon to complete the treatment of favourable patients after their discharge.

The period is, however, sufficiently long to allow the most appropriate line of treatment to be found and initiated and to ensure a very sound course of instruction being given to each patient.

The educational work in the Sanatorium and Dispensary is very closely linked up with treatment. It is one of the special features of the Southampton scheme, and is dealt with under the heading of "Preventive Measures."

Tables on the results of treatment and explanations thereof are given on Pages 60 to 69.

DENTAL TREATMENT.

Until the last month of the year, patients requiring dental attention were usually recommended to go to a dentist, the hospital, or the New Road Dispensary. Extractions at the Hospital and Dispensary are performed free of charge, and at the latter institution teeth are extracted under gas, and artificial teeth supplied at a reasonable and much reduced charge.

In the case of one insured patient under treatment, her progress was being hindered by the very septic condition of her teeth. She could not afford dental treatment, therefore, the Insurance Committee were recommended to supply artificial teeth. The Committee acted on the recommendation, and a local dentist removed the decayed teeth and supplied artificial ones at a cost of £5. There was, at the time, some difficulty between the Insurance Commissioners and the local Committee concerning the payment of this item, but the results have fully proved the wisdom and economy of the Committee's action. The patient is now cured, is at full work, and can support herself. A satisfactory result in this case would not have been likely without the dental treatment.

Towards the end of the year, the School Clinic was opened, and it is now possible for necessary extractions of teeth to be undertaken by the full-time municipal dentist. If necessary, anæsthetics are administered by the Tuberculosis Medical Officer, and the Tuberculosis Nurses attend on the dentist. School children attending the Dispensary have defective teeth filled or extracted, as may be necessary, but in adults it is only possible to undertake necessary extractions.

Extracting the teeth of adult patients occupies very little time, and is not allowed to interfere with the primary duties of the School Dentist. The work is undertaken at times when school children are not being attended to.

ARRANGEMENTS FOR TREATING NON-PULMONARY TUBERCULOSIS AND FOR THE PROVISION OF SURGICAL APPARATUS, ETC.

The records show very few non-Pulmonary cases, but this is somewhat accounted for by the fact that a patient exhibiting both a Pulmonary lesion and non-Pulmonary lesion is recorded under the heading of Pulmonary Tuberculosis, and not under both.

During the year many varieties of Tuberculosis were dealt with, including Tuberculosis of glands, bones, joints, kidney, bladder, and skin.

In a few cases the Corporation and the Insurance Committee have provided simple surgical apparatus, such as belts and splints. In cases where the patient's financial condition was satisfactory he has been encouraged to provide his own surgical apparatus, for it has been found that much greater care is taken of apparatus when purchased by the patient.

PREVENTIVE MEASURES.

It must be obvious to every careful observer that the wide-spread nature of Tuberculosis is such that years must elapse before any scheme can secure effective treatment of all cases. Moreover the insidious nature of the disease results in a large number of patients becoming very advanced, highly infectious, and beyond hope of recovery before they consult a doctor. Indeed, one of the appalling features of the work is the advanced degree of the disease and the hopeless outlook in the majority of patients applying for treatment. Preventive work must be regarded as of as great, if not greater, importance than the medical treatment of individual cases, and for some considerable time to come the indirect results of preventive efforts will be greater and more valuable to the community than the direct results of treatment.

Preventive measures, independent of curing the disease, received very careful consideration when the Municipal scheme was formulated, and much attention is directed towards them. The methods adopted may be described under five headings: (1) Education, (2) Collection and disposal of sputum, (3) Disinfection of clothes and houses of Tuberculous persons, (4) Detection and remedying of sanitary defects in the houses and environments of Tuberculosis subjects, (5) Isolation of infectious persons.

(1) Education.

The education of Tubercular patients in personal hygiene and diet has formed one of the special features of the local scheme. It is impossible to isolate all infectious persons, and it is beyond all question that under the present social conditions appropriate instruction to the infectious on the prevention of the spread of Tuberculosis is one of the most useful weapons in the armamentarium of the local Authority.

The living germs of the disease are in the sputum of Tuberculous patients, and this is the medium by which the disease
is mainly propogated. When an infected person expectorates
on the floor, the sputum gradually dries up and becomes mixed
with the dust of the room, or public street, as the case may be.
The dust is blown about by draughts or wind, and may thus be
inhaled by healthy people or become deposited on food. It is
now universally believed that the disease is spread in this way.
If, therefore, all infected persons can be taught to dispose of
their sputum in a proper manner the spread of the disease will
be considerably checked. Every patient who attends the Dispensary for treatment receives individual instruction, at his first
visit, on the disposal of sputum and method of coughing. At
his subsequent visits he is frequently spoken to on the matter,
and is impressed with the moral duty he owes to the community.

Courses of lectures are given periodically in the waiting room at the Dispensary by members of the staff, and all patients are invited to attend. The subjects usually dealt with are:—

Lecture I.—Fresh air and ventilation.

- ,, 2.—Collection, disinfection and disposal of sputum.
- ,, 3.—Personal hygiene.
- ,, 4.—Care of the teeth.
- " 5.—Clothing, rest, exercise and sleep.
- ,, 6.—Food.
- ,, 7.—Care of infants (women only).

During their visits to the homes the nurses pay special attention to the educational needs of each patient and his family, and lay stress on necessary points. In fact, the chief work in the home visiting is that of educating the people how to live in their own homes. "Rules of Health," printed on cardboard and suitable for hanging up are left in each home and patients are recommended to display them in such a position as to always catch the eye.

All patients admitted to the Sanatorium undergo a thorough ducational course and some are admitted with this as the primary

object. Lectures are given twice weekly to all patients, and every detail of personal hygiene is thoroughly instilled into each patient before his discharge.

The patient is compelled to live a thoroughly hygienic life, and it is intended that his period of stay in the Sanatorium shall form an example of how to live on his return home. After his discharge the home visiting nurse makes a special point of continually reminding the patients if any neglect in carrying out hygienic rules are found.

Although some patients appear indifferent to the welfare of themselves and those around them, the majority make a very satisfactory attempt to lead the life taught them, and the results are gratifying.

(2) Collection, Disinfection and Disposal of Sputum.

Every notified case of Tuberculosis in the Borough who expectorates is offered a sputum bottle and disinfectant fluid. He is taught to place disinfectant in the bottle and to carry it with him at all times so that he may expectorate into it. He is further taught to dispose of the sputum either by burning or by means of the water closet, and to afterwards boil the bottle.

The nurse is constantly examining patients with regard to these duties, and the majority are now carefully using the flasks.

The use of handkershiefs is discouraged, and patients are advised to use pieces of paper, which are afterwards burnt.

(3) Disinfection of Clothing and Dwellings of Tubercular Patients.

When a patient dies or is removed to a public institution or changes his address the fact is notified to the Chief Sanitary Inspector, who visits the house and offers to disinfect all rooms and clothing which may be infected. The following figures show the extent of work carried out under this heading during the year:—

No. of disinfections carried out after deaths 86 No. of disinfections carried out after removal of patients to public institutions or after change of address ... 106

It is not possible to disinfect all houses because objections are raised. The public is not sufficiently educated to realise that the disease is infectious.

(4) Details of Sanitary Defects and their Remedy.

The home of every notified case is visited as soon as possible after notification and the nurse makes a report on the home conditions, which includes reference to mode of life of the family and financial and sanitary conditions.

If any sanitary defects in the condition of the house are discovered they are reported to the Chief Sanitary Inspector. As a result of these reports the following improvements have been effected during the year in the homes of tubercular persons:—

Drains relaid		• • •		2
The state of the s				6
				2
	ed			ī
Drains cleaned and repaired		4		
				5
±	• • •			_
	• • •			3
				9 26
				8
A	eu	• • •		14
±				II
	aired	• • •	• • •	7
9				5
	d floor	rooms		6
±	• • •			3
Yard paving repaired	• • •			12
Sanitary dustbins provided		• • •		9
Offensive matter removed		• • •		Ī

Many of the patients live in very poor houses and frequently express a disinclination to call attention to sanitary defects. The reason offered is that the landlord will give them notice to quit if he is called upon to carry out any special work or repairs.

(5) Isolation of Infectious Persons.

All tubercular persons are strongly urged to sleep in bed alone, and if possible to occupy a bed room alone. They are also advised to use separate cups, plates, spoons, towels, etc. Many advanced cases, especially if living in overcrowded houses, are removed to the Sanatorium chiefly for isolation and education. It is not, of course, possible to admit all such cases to the Sanatorium, and, therefore, others are urged to apply to the Guardians for admission to Shirley Warren Infirmary.

Such are a few of the details of the scheme which has been evolved at Southampton, and it will be seen that the Authority which receives notifications of the disease from general practitioners is the one which undertakes dispensary and sanatorium treatment of the residents, whether insured or not, in addition to dealing with methods of prevention, including disinfection, home visiting and the spread of knowledge.

A patient coming under the Municipal scheme is received, treated, educated and guided in his future life and work by the one organization; this same organization protects his dependents and those in contact with him, and is the body which has the power more than any other to influence the social and economic conditions under which he lives.

This grouping of all measures for dealing with Tuberculosis under one set of officials allows a complete co-ordination of effort and prevents overlapping, and it is difficult to believe that any other scheme which sets up more than one body of workers can work with anything like the same measure of success economy and harmony

RESULTS OF TREATMENT.

The tables which are appended show the results of treatment in those patients who were discharged from the Borough Sanatorium during the year 1913. A separate set of tables show the results for those patients who came under and were discharged from active treatment under the Municipal Scheme during the same period.

The patients have been placed in three groups, and show in

separate tables, those with :-

(A) Tubercle Bacilli present.

(B) Tubercule Bacilli absent. Albumen present to the extent of .2 per cent. or more.

(c) No expectoration. Tuberculin reaction positive.

The patients in each group have been classified as to the stage of the disease at the time of coming under treatment; males and females being shown separately. The classification adopted being the Turban-Gerhardt (Imperial Board of Health). They have further been classified according to the method adopted in the Astor Report.

On discharge they have been classified according to their economic condition (working capacity) and also as to their

physical condition.

The following are the details of the classification adopted:-

*Turban-Gerhardt Classification (Imperial Board of Health.)

STAGE I.—Disease of slight severity, limited to small areas of one lobe; that, for instance, in case of infection of both apices, does not extend beyond the spine of scapula and the clavicle, or in the case of affection of one apex frontal, beyond the second rib.

- STAGE II.—Disease of slight severity, more extensive than I., but affecting at most, the volume of one lobe; or severe disease, extending at most to the volume of one half lobe.
- STAGE III.—All cases extending beyond II., and all such with considerable cavities.

†CLASSIFICATION OF PATIENTS, ASTOR REPORT.

- (I) Cases in which the disease can be diagnosed or is strongly suspected, but in which there is no evident impairment of the working capacity.
- (2) Cases of recent onset with some impairment of the working capacity, but without marked evidence of ill-health.
- (3) Cases of recent onset with evidence of acute illness.
- (4) Cases of a longer history of illness. In some of these cases permanent arrest of the disease may be hoped for, but in the majority, restoration to full working capacity for more than a comparatively short period is not to be looked for.
- (5) Cases in which there is a permanent loss of working capacity. Many of these patients live for a considerable period in a condition of chronic ill-health.
- (6) Cases in which a fatal termination within six months is probable.
 - ECONOMIC CONDITION ON DISCHARGE FROM TREATMENT.
- (I) No evident impairment of working capacity.
- (2) Some impairment of working capacity.
- (3) Marked loss of working capacity.
- 4) Very marked loss of working capacity.
- (5) Very marked loss of working capacity and progress unfavourable.
- (6) Probable fatal termination within 6 months.

TABLE I.

CLASSIFICATION OF THE IMMEDIATE RESULTS OF TREATMENT IN THOSE PATIENTS DISCHARGED FROM THE BOROUGH SANATORIUM DURING 1913.

(A) Tubercle Bacilli present.

	Total			4))	H		∞		1		- 59	26	90	90
		Died.			•	•		:	,			ω	m	0	0
		Worse.			:	:		•		•		6	7		ro
	lition.	No change.			•	•		н	-	٦		13	7		22
	Physical Condition.	Im- proved.			:	•		4		:		91	5		25
On Discharge.	Phys	Much improv'd			:	H		64	i	H		15	4		23
On		Disease arrested.			•	•	-	Η .		* 5 ~	•	н	:		74
		Total			:	I	. 1	œ		01		54	23		88
		9	1		•	•		•		н		9	9		13
	, c	5			:	:		:		•		IO	7		17
	‡Economic Condition.	4			:	:		:		:		10	н		II
	Ecor	3			:	:		61		:		II	4		71
	170	1 2			:	:		٧٢)	•		15	ν,		25
		H			:	н		Н		н		64	: _	_ _	5
		Total			:	н		œ	;	C 4		59	26		96
on.	+	9			:	:				:		9	7		[13
On Admission.	on	5			:	:				:		28	9		34
Adn	†Classification	4			:	н		1	`	•		14	10		32
On	assificat (Astor).	3			:	:		- 10		64		IO	3		15
	†C16	8			:	:		٢	٠	<u>:</u>		` H	:_		- 77
		н			:	:			:	:		:	:		<u>:</u>
	Classification of Cases	Gerhardt		Stage I.—	Males	Females	þ	Stage II.—	maies	Females	Stage III.—	Males	es		Total

	T	lotai		5	C1		4	y		4	64	23
		Died.		:			• •	•		•	:	•
		Worse.		•	*		•			•		•
	ndition.	No change.		0 0	0 0 0		H	•		•	I	63
	Physical Condition.	Im- proved.			Н		н			П	Н	4
On Discharge.	PF	Much improv'd		4	•		23	4		3		13
On		Disease arrested.		Н	Н		•	62		. •	•	4
	Total			5.	71		4	9		4	71	23
		9		•	9		:					
	mic on.	\n						•			•	
	‡Economic Condition.	4		:	•		•				•	a •
	Cor	<u> </u>		:	•		:		-		61	- 21
		64		:	н		3	H		3	:	∞
		Н		5	H		H	2		н	0 0	I 3
	Tots			5	(1		4	9		4	61	23
ion.		9		:	:					:		:
miss	ion	5		:	•		H	:		•	•	H
On Admission.	assificat (Astor).	4		Н	•		H	3		21	Н	8
On	†Classification (Astor).			:	•		•	•		H	H	61
	†C]	8		(1	н			n		Н		7
		H		C1	н		C1			:	•	2
to	÷			:	· · · · · · · · · · · · · · · · · · ·		* **	S	1	•	:	•
Classificati	Classification of Cases *Turban- Gerhardt.		Stage 1.—	Males	l'emales	Stage II.—	Males	Females	Stage III.—	Males	Females	Total

(B) Tubercle Bacilli absent. Albumen present to the extent of '2 per cent. or more.

*Table of explanation, page 60. †Table of explanation, page 61. ‡Table of explanation, page 61.

			Tota			13	5 4	20	Ψ.	۷ +)		9		٦		26
				Died.			•	•		•	•		н		•		н
				Worse.			•	•		•	•			•	•		:
			Physical Condition.	No change.			•	3		•	•		þ	4	:		4
	ge.		Physical (Im- proved.		C	_∞	5		8	8			N	:		21
	On Discharge.			Much improv'd			Ŋ	တ		ı	C3			21	н		61
itive.	9			Disease arrested.			:	01		:	н	•		:	:		11
reaction positive.			107	Total			13	26		4	9			S	н		55
101				9			:	:	 	:	:			:	:		:
act			· ·	5			:	<u>-</u> -	 	:	:			:	:		<u>:</u>
			‡Economic Condition.	4			:	:		:	:			:	:		
ılin			Scon	3			н	4		:	:			:	:	_ -	5
ercı			Ę,Ŏ	1 71			6	9		33	12			5	н		24 26
Tuberculin				H			3	91		н	4			:	:_	_	24
		-		Total			13	26		4	9			9	н		56
<u>(1</u> 10))11.		9			:	:		:	:			:	:	_ -	:
ora		On Admission.	on	2			•	:		:	:_			61	н	_	
ect		\dm	icati or).	4			9	5		3	9			4	:		24
3xp	۱ ا) u	†Classification (Astor).	2			:	22		:	:			:	:		5
H C			‡CI:	73			3	7		H	•			:	•		II
Z				н			4	6	 	<u>:</u>	:			:	:		13 11
(c) No Expectoration.			Classification of Cases	Gerhardt.		Stage I.—	Males	Females	Stage II.—	Males	Females		Stage III.—	Males	Females		Total
	1		*			S			S				U)				

*Table of explanation, page 60. †Table of explanation, page 61.

TABLES.
THREE PRECEDING
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THE
Y OF
SUMMARY

	Total											
_	E	101		18	29		91	14		69	29	175
ge.	Physical Condition.	Died.		•	•		:	•		9	3	6
		Worse.		•	•		•	•		6	7	91
		No change.		•	3		2	I		14	∞	82
		Im- proved.		8	9		∞	8		61	9	50
On Discharge.		Much improv'd		0	6		22	7		20	ν,	55
0		Disease arrested.		н	II		Ι	3		H	0 0	17
	Total			18	29		91	14		63	26	991
	‡Economic Condition.	9		•	•		*	Н	· •	9	9	13
		20		:	•		•	•		IO	7	17
		4		:	•		•	:		IO	н	II
				H	4		61		,	II	9	24
		7		9	7		II	3		23	9	59
		Н		∞			3	10		3	:	42
	Total	loca		18	20)		91	14		69	29	175
on.		9		:	•		•			9	7	13
On Admission.	†Classification (Astor).	5		:			Н	:		30	7	38
Adn		4		7	9		II	6		20	II	64
On		n		:	3		:	61		II	4	22
		77		2	∞		23	3		C1	•	20 22
		н		9	10		. 01	•		•		1 8 I
Classification of Cases *Turban- Gerhardt.			Stage I.—	Males	Females 10	Stage II.—	Males	Females	Stage III.—	Males	Females	Total

*Table of explanation, page 60. †Table of explanation, page 61. †Table of explanation, page 61.

TABLE II.

CLASSIFICATION OF THE IMMEDIATE RESULTS OF TREATMENT IN THOSE PATIENTS DISCHARGED FROM ACTIVE TREATMENT UNDER THE MUNICIPAL SCHEME DURING THE YEAR 1913. (A) Tubercle Bacilli present.

1	Total			01	0	4	30	14	91	70	
		Died.		•	•	:		ın	3	8	
		Worse.		•	-	H	•	II	4	91	
	Condition.	No change.		•	:	I	¢:	OI	7	20	
şe.	Physical Condition.	Im- proved.		•	•	þed	н	7	I	IO	
On Discharge.	F ,	Much improv'd		•	61	. 1	н	∞	H	13	2
On		Disease in arrested.		C1	•	•	I	:	•	ω	
	Total I			C1	C1	4	ν	36	13	62	
		6		:	•	•	Н	IO	22	91	
,	‡Economic Condition.	1 20		:		:		2	3	00	
		4	_	:		н	I	∞	C1	12	
	con	~	-	:	•	н	н	4	н	1	
		77	-	:	:	Н	:	∞		II_	-
		- H		77	61	н	61	н	•	∞.	- 1
		Total		2	<i>C</i> 1	4	ν.	41	91	70	
5				•	:			7	. 2	12	-
Oz Admission	uc	-	0					10	3	22	-
	catic	.	4		. 7	C	СН	·	4	18	-
3	ssifi	(AStol).	m		: :	•	3		4	14 T	
	†Classification	1	61		· :		: H	<u> </u>	•	3	-
		-	н)	→ :				: :	Н	-
	Classification of Cases	*Turban- Gerhardt.		Stage 1.	Males Females	Stage II.—	Males Females	Stage III.—	Males Females	Total .	

		lotal		n	S	and the consequence of	61	8		н	C1	91
	Physical Condition.	Died.		•	* *		•	•		:	:	:
		Worse.		•	•			•		•	•	•
		No change.		н	•		*	•		*	н	64
		Im- proved.		H	* * *		*	H		H	н	4
On Discharge.		Much improv'd		*	C1		Ħ	61		•	•	v.
On Di		Disease arrested.	,	⊢	8		н	•		•		N.
-	Total		(n	2		71	33		H	C1	91.
	‡Economic Condition.	9		:	•		:	:		:	:	
		5		:			•	:	mention of a second		•	•
		4		:	:		:	:		:	•	
		ω	<u>+</u>	⊣	•		:	:		•	н	64
		- 61		⊣	C1			H		н	н	9
		н		⊣	3		L1	71		:	:	∞
	Total		r	?	S		υĵ	33		н	C1	.91
011.	†Classification (Astor).	9		:	:		•	:		:		:
nissi		2			0		н	:		•		н
On Admission.		+		:	н		•	٢٦		н	н	S
On		~	⊢	4				:		•	н	C1
		C1		•	L1		:	н		•		3
		н	•		Cł.		н			•	1	S
Classification	of Cases *Turban- Gerhardt		Stage I.—		remales	Stage II.—	Males	Females	Stage III.—	Males	Females	Tota!

(B) Tubercle Bacilli absent. Albumen present to the extent of '2 per cent. or more.

*Table of explanation, page 60. †Table of explanation, page 61. ‡Table of explanation, page 61.

29

17

10

63

.

Total

Died. • • Worse. 0 : 01 • : : Physical Condition. change. N_o • C1 • • C1 . proved. Im-S : C1 : On Discharge improv'd Much 19 : \Im 5 6 arrested. Disease Tuberculin reaction positive. 34 12 17 Total 62 01 3 \circ : 17 29 : : • 9 : : : : ‡Economic Condition. S • H • H 4 Ø H 3 12 H H S 01 3 Ø 47 CC, C1 23 C1 21 H Total 63 : 29 10 4 17 (c) No Expectoration. On Admission. : : : : . 9 :_ 4 †Classification : \Im S I 21 (Astor). 1 H ∞ 4 4 : 4 : H C1 3 II : C4 : H H 1/ C1 ... 23 01 ... H Gerhardt. Classification Females Females Stage III.— Females of Cases Stage II.— Males Males Males Stage I.— *Turban-Total

*Table of explanation, page 60. †Table of explanation, page 61. †Table of explanation, page 61.

SUMMARY OF THE THREE PRECEDING TABLES.

_	100	100		22	36		6	81		46	81	149
		Died.		•	*		9 9 9	0 0 0		9	3	6
		Worse.			9 9 0		H			II	4	81
	ondition.	No change.		н	63		H	8		IO	∞	24
rge.	Physical Condition.	lm- proved.		н	н		63	4		6	ú	61
On Discharge.		Much improv'd		ν.	13		÷C	9		6	н	37
0		Disease arrested.		15	20		61	4		н	* *	42
	Total			c1 c1	36		6	18		40	15	140
		9		•	:			H		IO	5	91
	nic m.	20		•	:		:	•		5	3	∞
	‡Economic Condition.	4		•	•		H	8		∞	63	13
	Eco	3		н	H		н	63		4	61	II
	++	77		3	5		C1	9		IO	n	29
		н		81	30		5	7		3	•	63
	Testal	Total		C1 C3	36		6	81		46	18	149
ion.		9		•	:		•	•		7	50	12
On Admission.	tion	22		H	•		H	•		2.2	3	27
Adı	assificat (Astor).	4		4	II		4	01		10	5	44
On	†Classification (Astor).	3		23	8		C1	3		9	5	20 44
	‡C]	61		61	6		н	4		Н	*	
		I		I3	14		н	н				29 17
Clockbook	of Cases *Turban-	Comarac	Stage I.—	Males	Females 14	Stage II.—	Males	Females	Stage III.—	Males	l'emales	Total

*Table of explanation, page 60. †Table of explanation, page 61. ‡Table.of explanation, page 61.

LEPROSY.

One death from Leprosy was recorded in the Union Infirmary during the year. The man was a ship's steward, aged 34, and had resided in Mount Pleasant Road for some years. The disease was first noticed nine years before death when he was trading from Indian to Russian Ports. The disease was of the anæsthetic form of Leprosy. The deceased had undergone several operations, and the examination of a section of nerve removed demonstrated the presence of the Bacillus Lepræ.

He had married after contracting the disease, and had one child. Neither the wife nor child showed any signs of the disease at the time of the man's death.

CANCER.

The number of deaths due to Cancer amounted to 139, which is an increase of 30 over the previous year, and is the highest number recorded in Southampton in any one year. The death-rate from the disease was 1.12 per 1,000 of the population. This is higher than in the two previous years, but slightly lower than in 1910. The increased number of deaths for the year occurred entirely amongst females, the death-rate for each sex calculated upon the estimated male and female population being: Males, 0.88; females, 1.33.

The number of deaths of males and females and the deathrate from this disease of residents of the Borough since 1905 is appended:—

* 00#			Males.	Females [*]	Total.	Death Rate.
1905		• • •	•	67	102	0.91
1906		• • •	35 51	74	125	1.10
1907 1908		• • •	38	69	107	0.91
1900		• • •	52	$5\overset{\circ}{3}$	105	0.90
1910		• • •	61	74	135	1.15
1911			60	65	125	1.05
1912		• • •	54	55	109	0.90
1913	• • •	• • •	53	86	139	I.I2

The incidence of deaths from Cancer in the Municipal wards since the alteration of their boundaries in 1911, is shown in the following table:—

Death-rates from Cancer in Municipal Wards, 1911 1912 and 1913:—

	Ward.			1911.	1912.	1913.
I.	Town	• • •	• • •	0.86	1.03	I.44
2.	St. Marys	• • •	• • •	I.II	0.71	1.08
3.	Northam	• • •	• • •	I.I2	0.69	0.93
4.	Trinity	• • •	• • •	0.66	1.55	0.98
5.	Newtown			0.84	0.36	1.42
6.	All Saints	• • •		1.81	0.82	0.66
7.	Bevois			I.47	1.34	2.14
8.	Banister	• • •		1.25	1.09	2.09
9.	Freemantle	• • •	• • •	0.63	I.OI	1.35
IO.	Millbrook	• • •		1.30	0.85	0.71
II.	Shirley		• • •	1.03	0.89	0.53
12.	Portswood	• • •		0.84	0.59	0.89
13.	St. Denys	• • •		0.74	0.95	0.57
						•
Во	orough	• • •		1.05	0.90	1.12

The localisation of the disease of the deaths recorded from Cancer is shown in the following table:—

				Males.	Females.	Total.
Jaw	• • •	• • •		2	I	3
Lip	• • •	• • •		I		I
Mouth		• • •	• • •	I		I
Tongue		• • •	• • •	7		7
Esophagus		• • •		6	I	7
Stomach		• • •	• • •	6	7	13
Liver		• • •	• • •	4	13	17
Gall Bladde	er	• • •		2	I	3
Pylorus	• • •	• • •	• • •		I	I
Intestines	• • •	• • •		2	4	6
Cæcum	• • •	• • •			2	2
Ascending (Colon	• • •		2	I	3
Colon	• • •	• • •	• • •	3	5	8
Rectum	• • •	• • •		3	7	IO
Inguinal Gl	ands	• • •			I	I
Uterus	• • •	• • •			17	17

				Males.	Females.	Total.
Cervix	• • •		• • •	-	2	2
Ovary		• • •	• • •		2	2
Vulva	• • •		• • •		ı	I
Breast	• • •	• • •	• • •		12	12
Larynx	• • •	• • •	• • •	3		3
Lungs	• • •	• • •	• • •	I	I	2
Bladder	• • •	• • •		2		2
Kidney	• • •	• • •	• • •		I	I
Prostate		• • •	• • •	3		3
Penis	• • •	• • •	• • •	I		I
Brain	• • •	• • •	• • •		. I	I
Nose	• • •	• • •	• • •		I	I
Mastoid	• • •		• • •		I	I
Glands of	Neck	• • •		2	I	3
Pancreas	• • •	• • •	• • •	2	I	3
Mediastinu	ım	• • •	•••		I	I
					96	
	Totals	• • •	• • •	53	86	139

The ages at death are shown in Table II, pages 123 and 124.

ISOLATION HOSPITAL.

Cases Isolated for Treatment.

THIS TABLE SHOWS ALL ADMISSIONS TO THE ISOLATION HOSPITAL AND HOSPITAL SHIP, AND INCLUDES ALL CASES REMOVED FROM VESSELS IN THE PORT, AND CASES ADMITTED FROM NEIGHBOURING DISTRICTS.

		7 3						
Case Mortality (Actual cases).	1	I.25	9.87	10.34]	4.6	1	
Average number of days in Hospital (Cases treated to a conclusion.)		34	23	50	1	1	1	
Remaining in Hospital, 31st Dec., 1913.	1	19	26	8		41		88
Died.	1	**	24*	3	1	6	1	39
Dis- charged.	I	162	206	30	77	165	4	590
Cases. Admitted not proving to be disease notified or suspected.	1	33	21	C1	н		1	
Diagnosis confirmed at Hospital.	I	091	223	29	21		4	
Total number of Admis- sions.	H	163	244	31	22	195	1	099
Cases Remaining in Hospital, 1st January, 1913.		21	12	4	1	20	1	57
	:	*	•		*	•	•	*
THED ED.	•	•	•	•	o o	*	:	•
Non	•	•	•	:	•	•	:	•
DISEASE NOTIFIED OR SUSPECTED.	Small Pox	Scarlet Fever	Diphtheria	Enteric Fever	Measles	Phthisis	Other Diseases	Total

Note.—Included in the above is I death of case admitted as Scarlet Fever, which was not Scarlet Fever, and 2 deaths of cases admitted as Diphtheria, which were not Diphtheria.

Six hundred and fifty-nine patients were admitted to the Isolation Hospital during the year 1913, being an increase of 82 compared with the previous year.

There was an increase of 81 in the number of cases of Diphtheria admitted, and a remarkably severe type of the diseases was prevalent.

There was an increase of 99 in the number of Phthisis cases admitted.

On the other hand, there was a decrease of 83 in the number of Scarlet Fever cases, and these were mostly of a mild type.

There was a slight decrease in the number of cases of Enteric Fever treated.

Scarlet Fever.—One hundred and sixty-three cases were admitted. Of these, three were found not to be suffering from Scarlet Fever, and were diagnosed thus: Measles, with Pneumonia, I case, which was fatal; Uræmia, following chronic nephritis, I case, which was fatal; simple Erythema, I case, recovered. To the remaining 160 cases should be added four cases sent in as Diphtheria, and found to have Scarlet Fever. Of these 164 cases, 162 have been discharged, and 2 died, giving a mortality of I.2I per cent. of the actual cases admitted.

Diphtheria.—Two hundred and forty-four cases were notified. Of these 21 were found not to be suffering from Diphtheria. These cases were diagnosed thus: Scarlet Fever, 4 cases, of whom I died; Septic Throat, I case, who died; Tonsillitis, I4 cases Broncho-pneumonia, I case; Foreign body in larynx, I; total 21 cases, of whom 2 died, while the rest recovered and were discharged. Of the remaining 223 cases, 197 have been discharged and 26 died—a mortality of II.65 per cent. of the actual cases admitted. It was necessary to perform the operation of tracheotomy for the relief of laryngeal obstruction in II cases of which four died. The details of the fatal cases are appended:—

Initials.		Age.	Day	y of Disease Admission.	No. of in Hosp	days oital.	Remarks.
E.W.	• • •	I	•••	4		•••	Laryngeal obstruction— tracheotomy
E.G. A.C.		5 mths.		3		• • •	Severe toxic case Laryngeal obstruction— tracheotomy
E.N.	• • •	6	• • •	4	6	• • •	Severe toxic case, with Broncho-pneumonia
F.T.	• • •	12	• • •	···		• • •	Laryngeal obstruction, moribund—tracheotomy

W *. * 1				ny of Dise		No. of o				
Initials.		Age.	OI	Admissio	n.	in Hosp	ital.	Remarks.		
N.H.	• • •	IO	• • •	3		I ho	our -	Laryngeal obstruction—		
								tracheotomy		
B.P.		7		4		5		Severe toxic case		
M.M.	• • •	IO		4		58		Died of heart failure		
K.U.	• • •	7		5		4	• • •	Severe toxic case		
S.M.	• • •	9	• • •	2	• • •	4	• • •	Do.		
M.M.		7	• • •	5	• • •	2	• • •	Do.		
C.P.	• • •	8	• • •	5	• • •	I ho	our	Do.		
L.G.	• • •	i 6 mths.	• • •	- 5	• • •		• • •	Dead on admission; inquest held		
M.M.		6		6		2		Severe toxic case		
E.W.		6		5		2		Do.		
S.S.	• • •	5	•••	4	•••	. 17	• • •	Before admission had Nephritis and Broncho- pneumonia		
M.T.		3		5		I		Severe toxic case		
W.W.	• • •	4	• • •	2	• • •	II	• • •	Severe toxic case. Heart failure		
R.K.		7		4		I	• • •	Severe toxic case		
W.McC.		8		2		52		Had Nephritis and Heart		
								Disease		
J.M.		8	• • •	6		3		Severe toxic case		
A.S.		13		4		5	• • •	Do.		
F.H.	• • •	17	• • •	4	• • •	13	• • •	Severe toxic case. Heart failure		
R.M.		2		7		8		Severe toxic case		
JH	• • •	8		2		5	• • •	Do		
FM.		7	• • •	3		4		Do.		
gen		to Passass		T'1 1				1. 11 1 T		

Enteric Fever.—Thirty-one cases were admitted. Two of these did not have Enteric Fever, being cases of Pneumonia. Both recovered. Of the remainder, 26 have been discharged, and three died—a mortality of 10.34 of actual cases admitted.

The stools and urines of all the patients in the Enteric ward are examined bacteriologically, with a view of determining when they are free from infection.

BACTERIOLOGICAL LABORATORY.

The following bacteriological examinations were carried out during the year at the Isolation Hospital:—

Serum for Widal reaction			48
Other Blood examinations		• • •	3
Swabs for Diphtheria			1,131
Examinations for Tubercle Bac	cilli—		
(a) Sputum	• • •		128
(b) Urine			2
Pus for Gonococci			I
Examinations for pathological of	organi	sms o	f
(a) Fæces	• • •		12
			20
			8
Total			I,353

In addition numerous microscopical and chemical examinations were made of urine.

Included in the above figures are the following examinations made for medical practitioners in the Borough, viz.: For Diphtheria Bacilli, 207; for Widals, Typhoid reaction, 16; for Tubercle Bacilli in Sputum, 120; of other material, 3.

ISOLATION AND HOSPITAL SHIP.

The following Table shows the Districts from which cases were admitted during the year 1913.

Disease.	Boro'.	Port.	Itchen Urban.	East- leigh Urban.	New Forest Rural.	Romsey Rural.	Hursley Rural.	Total.
Small Pox Scarlet Fever Diphtheria Enteric Fever Measles	138 224 20	 2 7 9 2I	 4 I	 I	22 7 	I I 	 I 	1 163 244 31 22 195
Phthisis Other Diseases	195	2	•••	•••	•••		•••	4
Total	581	41	5	I	29	2	I	660

Comparative Mortality of Cases, occurring in the Borough, treated in the Isolation Hospital and outside.

		Whole B	Sorough	Treated Isolation	in the Hospital.	Treated at Home and in other Institutions.		
Disease.	-	Total Number of cases notified.	Case Mortality per cent.	Number of cases.	Case Mortality per cent.	Number of cases.	Mort per o	
Scarlet Fever		177	1.13	138	1.45	39	0	.0
Diphtheria	•••	357	8.40	224	9.82	133	6	.01
Enteric Fever	•••	33	18.2	20	15.0	. 13	23	.08
		<u> </u>		1				
Totals	• • •	567	6.7	382	7.07	185	5	•95

OUTBATHING STATION AND AMBULANCE SHED, AND DISINFECTOR, WEST QUAY.

These premises are used for the purpose of disinfection and bathing of persons who have been in contact with infectious disease particularly for contacts of cases of infectious disease landed by vessels arriving in the Port.

The buildings also contain an observation ward fo suspicious cases of sickness arriving in the Port, and the premises are further used as a discharge block in connection with the Hospital Ship.

The following is a list of the contacts and the discharged cases from the Hospital Ship bathed and disinfected at West Quay during the year:—

Small Pox case	• • •	• • •			I
,, contacts	• • •	• • •		• • •	2
Scarlet Fever contacts			• • •		29
Measles contact	• • •	• • •			I
1	• • •				3
Puerperal Fever contac	t	• • •	• • •	• • •	I

The following gives details of children treated at West Quay Hospital during the year 1913 in connection with the Medical Inspection of School Children:—

	Disease						Cases
Acne				• • •			I
Alopecia				• • •	• • •		4
Eczema					• • •		6
Furunculo	sis			• • •			I
Impetigo o	of Body	y					61
,,	Scal	Р			• • •		25
,,	Bod	y and	Scalp		• • •		9
,,	Scal	p and	Pedicu	losis	Capitis		22
Impetigo a							6
Psoriasis							I
Ringworm	of Bo	dy					57
Ringworm	of Sca	.lp		• • •			64
Ringworm	of Sca	.lp and	Body				18
Ringworm	and In	mpetig	0				5
Scabies							22
Verminous	condi	tion of	Head				15
						_	
	7	`otal					317

The following is a list of articles disinfected in the Steam Disinfector at West Quay, including articles removed from the

			,				0
Beds and M	[attresse	es	1		• • •	• • •	1,448
Bolsters ar					• • •	• • •	2,380
Blankets a						• • •	4,628
Sheets	110 2 0					• • •	2,093
	nac	•••					1,057
Counterpar	1105	• • •		•••	• • •		631
Books	• • •	• • •		• • •	• • •	•••	17,084
Sundries	• • •	• • •		• • •	• • •	• • •	1/,004
	To	otal		• • •	• • •	• • •	29,321

MIDWIVES ACT, 1902.

The number of midwives who notified their intention of practising in the Borough during the year amounted to 45, and increase of 7 compared with 1912.

Six of these midwives were only practising temporarily in the Borough. Seven only attended one case, or less, as midwives during the year, and two reside outside the Borough, but occasionally attend cases inside the boundary. One midwife died during the year from a disease contracted during the course of carrying out her professional duties.

Twenty-eight of the midwives were certified by reason of their having passed an examination in midwifery, viz:—Central Midwives Board, 20; London Obstetrical Society, 7; City of London Hospital, 1; the remaining 17 were certificated by reason of their having been in practice before the passing of the Act.

The number of women in the Borough who were delivered by midwives amounted to 2,079, of which 2,023 were live births and 56 still births. The total number of births registered during the same period was 2957, the percentage of live births attended by midwives was, therefore, about 68; the percentage in 1912 was 71, and in 1911, 69.

The number of births attended by Midwives in the Borough since 1910 are:—

are.—			Live Births.		Still Births.
1910		• • •	1,960	• • •	58
1911			1,973	• • •	61
1912	• • •	• • •	1,996	• • •	65
1913	• • •	• • •	2,023	• • •	56

The following notices were received and inspections made, during the year:—

Notices received of	intention to practice	45
,,	G	2
,,	sending for medical help 2	
,,		_
, ,	death occurring in practice	
Inspections and Vis	sits 1	05

The following is a list of complications for which medical help was requisitioned during the year:—

MOTHER.

Contracted Delinia					
Contracted Pelvis	• • •	• • •	• • •	• • •	4
Abnormal Presentation	• • •		• • •	• • •	17
Prolonged Labour	• • •		• • •		30
Ruptured Perinæum	• • •	• • •	• • •	• • •	13
Ante or Post Partum H	æmor	rhage	• • •	• • •	13
Retained Placenta or M	embra	anes	• • •	• • •	12
Rise of Temperature	• • •	• • •	• • •	• • •	IO
~ 1			• • •		4
Abortion or Premature	Birth		• • •	• • •	12
Convulsions		• • •		• • •	3
Exhaustion			• • •	• • •	4
Inflamed Breasts			• • •	• • •	2
Other Causes	• • •		• • •		18
					 142
	HILD.				
Feebleness of Child				• • •	27
Inflammation or Discha	rge fr	om Eye	es	• • •	23
Pemphigus	• • •		• • •	• • •	2
Malformation	• • •			• • •	5
Other Causes	• • •		• • •		7
					64
Tot	al		• • •		206

Inspections were made during the year at the residences of he Midwives in order to examine their registers of cases, and pags and appliances. In the majority of cases these were found a good order. Notice to comply with the Rules of the Central lidwives Board was given in those cases in which unsatisfactory onditions were found.

Lectures to Midwives in the Borough were given at various times during the year by the Medical Staff of the Health Department on the duties and responsibilities of Midwives under the Act.

Three cases of Puerperal Fever were notified during the year, being equal to a rate of 0.02 of the population, which compares favourably with the rate of 0.05 for England and Wales, and 0.07 for the County Boroughs of England. The average number of cases notified in the Borough during the past five years is 6.

The particulars of the cases notified and death occurring from Puerperal Fever during the year are:—

- January 31st.—S.B., Lyon Street. This woman was delivered by a Midwife on the 24th January. She was taken suddenly ill six days after confinement, and a medical man being called in diagnosed the case as one of Puerperal Fever. The illness proved to be slight, and the patient recovered.
- September 13th.—R.A.D., Bargate Street. This case was one of abortion, neither midwife nor medical man being in attendance. The patient subsequently developed Septicæmia, which proved fatal.
- October 17th.—E.P.H., Millbank Street. This case was delivered by a Midwife on 27th September. The Midwife ceased attending on the 6th October, when she states the condition of the patient was normal. The woman was apparently taken ill on the 15th October and a medical man was called in, who notified the cas as one of Puerperal Fever. Recovered.

In addition to the above cases a death was registered as having occurred in the Royal South Hants and Southampton Hospital from Puerperal Septicæmia. The case, which was not notified was one of Premature (six months) twin birth, and was delivered by a medical man on January 30th. The case was removed the Hospital on the fourth day after confinement for curetting and died on the 17th February.

GENERAL ROUTINE WORK.

Summary of Inspections and of Work carried out.

General Inspection of Houses and re visite		0
General Inspection of Houses and re-visits Inspections on complaint	• • •	00//
	· · ·	404
,, under the Housing, Town Planning,	αc.,	
Act, including the supervision of work	is in	
p ogress	• • •	6,944
of Warlaham and Wall	• • •	71
of Workshops and Workplaces		I,444
of Laundries	• • •	90
of Bakehouses		562
,, under the Shops Act	• • •	1,150
of Slaughterhouses	• • •	3,586
of Butcher Shops	• • •	3,898
,, of Sausage Factories		548
of Wholesale Stores, Markets, &c	• • •	590
,, of Dairies, Cowsheds and Milkshops		575
,, of Common Lodging Houses		1,089
,, of Houses Let in Lodgings		347
of Courts and Alleys		677
of Stable Yards, Mews, etc		303
Visits re Infectious Diseases, including Port contacts		3,376
,, re Non-notifiable Infectious Diseases (Sc		0,01
Absentees)		745
,, re Notification of Births		1,934
,, re Void Houses	• • •	226
,, re Weekly Death Returns		348
,, to Schools		282
Houses and Premies Disinfected		
Preliminary Notices served for the Abatement	of	/ + -
Nuisances	:	T 772
Nuisances	•••	825
Nuisances abated by Verbal Notice	• • •	T 718
Drains Tested with Smoke	• • •	260
Drains Tested with Smoke	• • •	254
Drains found Defective	• • •	334
,, cleared and repaired	• • •	159
re constructed	• • •	/15
,, re-constructed		
,, re-trapped		408
Inspection about an appropriate to be be and ventilated	• • •	171
Inspection chambers provided to house drains		
New soil pipes fixed on external walls of houses		75
Water closets re-constructed	• • •	113

Urinals re-constructed and pro-	ovided	with	means	of	- 0
duching	• • •	• • •	• • •	• • •	9
flushing New water-closet pans fixed				• • •	557
TTT 1 1-11 on to Water Closels		• • •		• • •	136
$\frac{1}{1}$ of house drain	s renai	red, &c	2.	• • •	230
Ventilating shafts of house drain Bath, sink waste-pipes, stack p	oines, e	etc., di	sconnec	ted	
from drains	•••	• • •	• • •	• • •	306
trom drains					188
Sanitary sinks fixed in houses	• • •			• • •	14
Premises drained to the sewer	• • •			• • •	7
Cesspools abolished	•••			• • •	_
Privies abolished	•••		• • •		701
Damp walls of houses remedied					888
Houses cleansed and whitewashe					486
Roofs of houses repaired					343
Eaves guttering and stack-pipes	ilated	•••		• • •	354
Rooms of houses efficiently vent	Hatoa	• • •			686
Window sashes made to open	٠	• • •	• • •		537
Flooring, windows, etc., repaired	a		ns		485
Ground floor ventilation provide	nrovide	ed to w	vater cle	osets	56 il
Means of light and ventuation.	provide	•••			395 F
Vards paved and drained	• • •	• • •			398 F
Yard paving repaired	houses		• • •		366 l
Sanitary dust-bins provided to	Houses		• • •		16
Overcrowding of houses abated	• • •	• • •			22
Courts re-imewashed	• • •	• • •			I N
Courts re-paved	o oto	abated			23
Nuisances from keeping animan	s, etc.,	apated			5
Manura vaults constructed		• • •	• • •		124
Manure and offensive matter re	inoved		• • •		4 1
Stables paved and drained	• • •		• • •		21
Smoke nuisance abated	• • •	• • •	• • •	,	
		TION	ACT	1010	
	TITLE	1986 6 6 6 6	43 11	JIU.	

SOUTHAMPTON CORPORATION ACT, 1910.

During the year 305 notifications were received with respect to the repair and alteration of drainage in compliance with Section 51 of the above Act.

The following works were carried out and supervised by the Department after notification:—

Department after no	illication.				14
Premises drained to	the sewer	 • • •	• • •	• • •	132
Drains re-constructed	d	 	• • •	• • •	122
cleared		 	• • •	• • •	128
• 1		 	• • •		78
	• • • • • • • • • • • • • • • • • • • •	 • • •	• • •	• • •	10
,, ventuated	• • • • • • • • • • • • • • • • • • • •				

	93
	71
• • •	212
	27
ns	45
	35
	36
	_
	19
• • •	158
• • •	4
	ns

DRAINAGE UNDER THE NEW BUILDINGS BYE-LAWS

During the year 357 plans were submitted, of which 310 vere approved and 47 disapproved.

The approved plans comprised:—

) welling Houses				• • •		357
tables				• • •		5
Iterations and additions						107
ewers, roads, &c				• • •		3
liscellaneous buildings						93
louses completed		• • •				269
tables						3
lterations and additions						84
liscellaneous buildings						73
umber of inspections du						2,426
umber of drains tested a			01 11 01		• • •	599
and the state of t	circi i c	CCSCCCI	• • •	• • •		399

POLLUTED WELLS

Three samples of water were taken from wells at Shirley hich supplied four houses, and one cowshed.

These samples were submitted to the Public Analyst and und on analysis to be polluted and unfit for drinking or domestic irposes.

Notices were served on the owners to provide a proper supply water to the houses.

These notices were complied with, and in the case of the three dwelling houses the water was obtained from the South Hants Water Company's mains.

One dwelling house and cowshed being at too great a distance from a public supply a deep well was sunk in a fresh position.

SLAUGHTERHOUSES.

There are 35 slaughterhouses in the Borough, one new license having been granted during the year.

Three thousand five hundred and eighty-six visits were made and the premises generally were kept in a satisfactory condition.

With a view to preventing as far as practicable unnecessary cruelty in the slaughtering of animals for food, the Council passed the following bye-laws which now await the approval of the Local Government Board:—

"A person shall not, in a slaughterhouse, proceed to slaughte "any animal until the same has been effectually stunned. The "instrument to be used for the effectual stunning to each class "of animal shall be an instrument prescribed by resolution o "the Council from time to time, after consultation with the "butchers carrying on trade within the Borough, who shall hav "the right before the adoption of any instrument by the Counci "to make representations as to the instrument best suited for th "purpose of humane slaughtering of animals, and such resolution "shall be published by advertisement in some one or mor "newspapers circulating within the County Borough of Southamp "ton, and otherwise in such manner as the Council think sufficien " for giving notice thereof to all persons interested, and shall com "into operation at such time not less than one calendar mont "after the first publication of the advertisement of the resolution "as the Council may by the resolution fix.

"Provided that this requirement shall not be deemed to apply to any member of the Jewish faith duly licensed by the Chief Rabbi as a slaughterer, when engaged in the slaughtering of cattle intended for the foods of Jews according to the Jewis method of slaughtering, if no unnecessary suffering is inflicted.

"A person shall not, in a slaughterhouse, slaughter, or cau or suffer to be slaughtered, any animal in the view of anoth animal.

"An occupier of a slaughterhouse shall not cause or allow any blood or other refuse to flow from such slaughterhouse so as to be within the sight or smell of any animal in the slaughterhouse, and he shall not cause or allow any such blood or other refuse to be deposited in the waiting pens or lairs."

MEAT AFFECTED BY TUBERCULOSIS SEIZED OR SURRENDERED.

					In Slaughter- houses.	In Shops.	Weight.
arcas	ses of Beef			 • • •	2	•••	1,788 lbs.
	" Pork			 • • •	8		1,240 lbs.
Part c	earcases of I	Beef Pork	• • • •	 	6 25	1 5	996 lbs. 308 lbs.

FOOD INSPECTION.

In the inspection of food the following visits were made to premises where food is prepared, stored or sold:—

Slaughterhouses	• • •		• • •		3,586
Butcher shops	• • •	• • •	• • •	• • •	3,898
Sausage Factories	• • •		• • •	• • •	548
Wholesale Stores,	Markets,	&c.	• • •	• • •	590

The following is a summary of the diseased or unsound food lestroyed during the year:—

		BEE	F.			
Whole carcase	es	• • •	• • •			2
Quarters						5
Livers	• • •					25
Lungs			• • •	• • •	• • •	9
Hearts	• • •		• • •		• • •	3
Tongues	• • •	• • •				2
Mesenteries	• • •		• • •		• • •	3
Stomachs	• • •		• • •	• • •	• • •	2
Spleens	• • •	• • •	• • •	• • •		3
Sundry Piece				• • •	11	203 lbs
Total weigh	nt of b	eef	• • •	3	3,451 lb	S.

PORK.

Whole carcases Heads Offals Livers Total weight of	···· ···· Pork	•••	• • •	•••	12 30 12 1 1,888 lbs.				
MUTTON.									
Whole carcases	• • •	• • •	• • •	• • •	I				
Plucks	• • •	• • •	• • •	• • •	3				
Lungs	• • •	• • •	• • •	• • •	. IO.				
Livers	• • •	• • •	• • •	• • •	2				
Heads		• • •	• • •	• • •	IO.0				
Total weight of	Mutton	• • •	• • •	• • •	542 lbs.				

FRUIT, VEGETABLES, ETC.

105 bags of Potatoes.

16 lbs. of Tomatoes.

8 lbs. Cherries.

8 lbs. Strawberries.

I basket of Cress.

38 Rabbits.

Total weight of Fruit, etc., 11,904 lbs.

		FIS	H.			
						Boxes.
Cod	• • •	• • •		• • •	• • •	· I
Cods' Roes	• • •		• • •	• • •	• • •	4
Hake	• • •	• • •	• • •	• • •	• • •	I
Haddock	• • •	• • •		• • •	• • •	I
Bream	• • •		a	• • •	• • •	4
Mackerel	• • •		• • •	• • •	• • •	40
Herrings		• • •	• • •	• • •	• • •	I
Soles			• • •		• • •	I
Megrims		• • •	•••	• • •	• • •	I
Skate		• • •	• • •	• • •	• • •	2
Whiting		• • •	• • •	• • •	• • •	2
Smelts				• • •	• • •	29
Bloaters	• • •		• • •	• • •	• • •	8r
Kippers	• • •	• • •		• • •	• • •	40
Haddocks			• • •	• • •	• • •	13
Haddocks (fil	lets)		• • •	• • •	• • •	16

						Boxes.
Codling				• • •		25
Sprats	• • •			• • •	• • •	IO
Mixed Fish		• • •			• • •	I
Eels	• • •				• • •	I
Mullett		• • •	• • •		• • •	I
Dog Fish	• • •				• • •	I
	33 tins	of Pra	awns.			
17 bags of Shrimps.						
	I bag	of Eso	callops.			•
	4 bar	rels of	Crabs.			y

Total weight of Fish ... 9,184 lbs.

DAIRIES, COWSHEDS AND MILKSHOPS ORDERS, 1885-1886.

There are 208 purveyors of milk registered in the Borough, including 6 cowkeepers and 15 purveyors of milk who reside outside the Borough. During the year 33 purveyors of milk have ceased to sell milk, and four cowkeepers have ceased to keep cows, and their names have been removed from the Register.

Applications have been received from 27 persons to be registered as purveyors of milk.

No change has been made in the register of those milk purveyors who reside outside of the Borough. The cleansing of dairies, cowsheds, and milkshops has been carried out in accordance with the Regulations, and various nuisances abated.

PARTICULARS.	Town Proper.	Shirley, Freemantle, and Millbrook.	Portswood and Bitterne Park.	Outside the Borough.	Total.
Number of Cowkeepers on Register	• • •	4	2		6
Number of Purveyors of Milk on Register	103	51	33	15	202
Number of Purveyors of Milk registered during the year	13	7	7	• • •	27
Number of Cowkeepers registered during the year			•••	•••	•••

COWKEEPERS IN THE COUNTY BOROUGH OF SOUTHAMPTON.

Name.				•	Situation.
C.B.			• • •	• • •	Royal Mail, Millbrook.
W.P.		• • •	• • •		Highcrown Street.
W.H.	• • •	• • •	• • •		Manor Farm Road.
W.M.	• • •				Blighmont Farm, Millbrook
A.H.W.		• • •	• • •		Cockroads Farm, Hill Lane.
H.C.	• • •	• • •	• • •	• • •	The Nest, Lordswood.

NUISANCES ABATED IN DAIRIES, COWSHEDS, AND MILKSHOPS.

Particulars.	Town Proper.	Shirley, Freemantle and Millbrook.	Portswood and Bitterne Park.	Total.
Milkshops cleansed and limewashed Dairies ,, ,, ,, Cowsheds ,, ,, ,, Drains re-laid , , cleared , repaired New pans and traps fixed Water supply to water closets New sinks and waste pipes Roofs and stack-pipes repaired Yard paving repaired Milk stores constructed Cowsheds paving repaired Manure removed Sanitary dust-bins provided	 I 3 I	72 30 16 2 2 5	50 16 8 3 3 2 1 1 4 1 2 1	298 76 24 4 5 2 3 2 1 2 9 1 4 6
Totals	. 220	127	92	439

FOOD AND DRUGS ACTS.

Four hundred and forty-two samples were taken by the Inspectors during the year and submitted to the Public Analyst.

One hundred and seventy-six were formally purchased in accordance with the Act, and 266 were informal, or test samples, 31 of the latter being milk samples.

Twenty-five samples, including 7 informal samples, were bund to be adulterated.

Proceedings were taken in eight cases, convictions being brained in each.

	Arti	CLE	•			1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Number of Samples.	Genuine.	Adulterated.
Milk Cream Butter Margarine Bread and Cheese Lard Flour Coffee Mustard Ground Gin Pepper Vinegar Olive Oil	• • • • • • • • • • • • • • • • • • • •						203 8 101 1 17 37 8 23 6 5 23 5	187 8 97 1 17 37 8 19 6	16 4 4 1
	Tota	ls		• •	•••	• • •	442	417	25

The following table shows the number of articles analysed which were found to be adulterated, and the result of proceedings taken.

No. of sample	Date.	Article.	Adulteration.	Result of Proceedings.
9	Jan. 9	Butter	100% Margarine	Test sample. Subsequents sample taken proved genuine
49 53	Feb. 6	Milk do.	2.94% of added water 6.66% deficient in fat	No proceedings taken Test sample. Subsequent sample taken proved
62 89	", 13 Mar. 6	Coffee do.	32.2% Chicory 33.11% ,,	genuine Test sample (see No. 89) Ordered to pay the costs of the Court (4/-)
168 170 173 176 178 182 186 293 294 295	May 19 ,, 19 ,, 19 ,, 26 ,, 26 Sep. 16 ,, 16 ,, 16 Oct. 3	Milk do. do. do. do. do. do. do. do.	3.33% deficient in fat 6.66% ,, ,, 6.66% ,, ,, 3.33% ,, ,, 3.33% ,, ,, 3.33% ,, ,, 3.33% ,, ,, 1.33% deficient in fat & 2.58% of added water 2.66% deficient in fat & 8.2% of added water 2.94% of added water 11.05% of added water 11.05% of added water 11.05% of added water	Vendor cautioned Ditto Ditto Ditto Ditto Ditto Ditto Ordered to pay the costs of the Court (8/-) Fined £2, and 8/6 costs Ordered to pay the costs of the Court (8/-) Fined £2 and 8/6 costs Test sample (See No. 378)
330 332 340	,, 10 ,, 10	Coffee Ground Ginger Milk	70% Chicory 40% Calcium Carbonate 8.66% deficient in fat	Test sample (See No. 383) Test sample. Subsequents sample taken proved genuine Vendor cautioned Fined £1, and 6/6 costs
362 378	,, 28 Nov.13	do. Butter	11.33% deficient in fat & 3.41% of added water 100% Margarine	Fined £1, and 6/6 costs also the costs of the
383 419 425	,, 14 Dec.18 ,, 18	Coffee Milk Butter	75% Chicory 6.33% deficient in fat 100% Margarine	Court (4/-) for unlabelled wrapper Fined £2, and 10/6 costs Vendor cautioned Test sample. Subsequent sample taken proved genuine

THE PUBLIC HEALTH (MILK AND CREAM) REGULATIONS, 1913.

The following are particulars of work carried out under the above Regulations during the year:—

I. Milk; and Cream not sold as Preserved Cream.

		(a)	(b)
		Number of samples	Number in which
		examined for	a preservative
		the presence of a	was reported to
		preservative.	be present.
Milk	• • •	202	Nil
Cream	• • •	2	2

The nature of preservative in each case in column (b) was Boric Acid. They were Test samples, and subsequent samples taken were labelled as Preserved Cream.

- 2. Cream Sold as Preserved Cream.
 - (a) Instances in which samples have been submitted for analysis to ascertain if the statements on the label as to preservatives were correct—

Correct state Statements is				6 Nil
Total	•••	• • •	• • •	6

(b) Determinations made of milk fat in cream sold as preserved cream—

(i) Above 35 per cent (ii) Below 35 per cent	• • •	6 Nil
Total	 • • •	6

- (c) Instances where (apart from analysis) the requirements as to labelling or declaration of preserved cream in Article V. (1) and the proviso in Article V. (2) of the Regulations have not been observed. Nil,
- (d) Particulars of each case in which the Regulations have not been complied with, and action taken.
- 3. Thickening Substances.—Any evidence of their addition to cream or to preserved cream. Action taken where found. Nil.

HOUSES LET IN LODGINGS.

There are 33 houses in the Borough registered under the Bye-laws relating to Houses Let in Lodgings.

Of this number 28 were placed upon the Register during the year on application being made to the Local Authority.

Three hundred and forty-seven visits were made, and the houses generally were kept in conformity with the Bye-laws.

COMMON LODGING HOUSES.

There are 18 common lodging houses in the Borough, with a registered accommodation for 600 persons, six new houses having been registered during the year.

Applications for the registration of all houses were made previous to the 31st December by the registered keepers in accordance with the provisions of the Southampton Corporation Act, 1910

One thousand and eighty-nine visits were made during the year, and the houses generally were kept in a satisfactory condition.

Proceedings were taken with respect to a person keeping two common lodging houses without the same being registered.

The cases were adjourned sine die, the defendant having made application for registration previous to the summons being heard.

Proceedings were taken with respect to a second person for keeping a common lodging house without the same being registered.

The defendant was fined Ios., and 6s. costs.

HOUSING.

The following table, which was issued in Vol. VI. of the Census Returns during the year, gives detailed particulars as to the number and description of buildings enumerated in the Borough.

	sed	o Z	(14)	2003 2003 2003 2003	•	:: 545 CT	1037	
Buildings not used as Dwellings. Kind of Building.		(13)	Places of Worship Government & Mun cipal Buildings Shops	-	Theatres and other places of amuse-	•		
	(.2 n	Separate Flats muloO ni bəbuləni)	(12)	204	209	777	7	
.05	d ,etc	Vessels, Sheds, Vagran	(11)		911	1,352	1	1
		Others.	(01)	47	49	217	0	
	gs.	.snoitutitsnI	(6)	157	191	2,884	∞	
	Dwellings.	Offices, Warehouses, Workshops, Factories.	(8)	136	142	536	5	
1161	as	Hotels, Inns, and Public Houses.	(7)	414	426	3,084	9	1
	ngs used	Shop.	(9)	1,514	1,636	7,160	84	61
	Buildin	Blocks of Flats.	(5)	C1 C1	209	777	I	
		Ordinary Dwelling Houses.	(4)	20,274	24,237	102,976	730	148
		Total. Columns 4-11	(3)	22,565	26,983	119,012	836	150
1061		Total.	(2)	19,843	23,048	104,824	1,130	231
			(1)	Southampton County Boro': Number inhabited	Occupiers	Population	Uninhabited	Being built

In July, Vol. VIII. of the Census of 1911 was issued dealing with tenements and classifying the people by the size of the family of which they are members and by the number of rooms in the occupation of that family.

The definition of the expressions "dwelling" or "tenement" and "private family" upon which the tabulation of the Census returns in this volume are based was stated in the instructions issued to the enumerators to be: A "dwelling" or tenement" is "a place in which any person entitled to receive a schedule usually lives," and the persons entitled to receive a schedule, and, therefore, for Census purposes regarded as heads of families, were stated to be: (a) Every head of a family occupying the whole or part of a house or flat. (b) Every separate lodger occupying a room or rooms in a house or flat (where two or more lodgers shared a room, or rooms, they were treated for census purposes as a single family). (c) Every resident caretaker of a house to be let, of a shop or of other business premises, or of a public building. (d) Every outdoor servant (with or without family) occupying separately any building or rooms in a building, such as a lodge, gardener's cottage, dwelling-rooms over a coach-house or stable, etc., which is detached from the house to which it belongs or has no internal communication therewith. (e) Every resident proprietor, manager or head of an hotel, club, business establishment, school, etc. (f) The chief resident officer of every institution. (g) The master or person in charge of every barge, boat or other The families under headings (a) to (d) have been treated as "private families," those under heading (e) as "private" only when the domestic members of the occupier's family exceed the non-domestic (i.e., trade servants, visitors, scholars, etc.), and those under headings (f) and (g) have been treated as nonprivate "families."

The total number of families or separate occupiers, "private" or other, amounted to 26,983, of which 26,642 were "private families," as defined above. The following table has been extracted from the Census Returns and shows the number of rooms in tenements in the occupation of Private families, and also shows the number of the persons in the families, and the number of rooms they occupied.

Tenements in the Occupation of Private Families.

Table showing the number of Rooms in Tenements in the occupation of Private Families, and the number of Persons occupying such Tenements.

	Population.	2,125 6,583 8,088 18,921 24,179 27,614 12,928 4,824 2,673 4,450	112,385
Total number of	Families Or Tenements.	1,354 2,493 2,203 4,514 5,176 5,828 2,781 974 530	26,642
	ro persons and upwards.	1 45 5 215 4 45 79 4 40 60 60	209
	9 persons.	25 25 161 220 62 33 19	632
Number of Private Families (or Tenements) consisting of :—	8 persons.	 13 14 26 26 30 142 142 53 62	1,050
ents) cons	persons.	1 2 1 2 3 0 8 4 4 4 4 5 5 5 4 8 8 7 8 4 6 6 7 8 4 6 6 7 8 4 6 6 7 8 6 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7	1,709
or Tenem	6 persons.	66 184 473 473 623 684 319 114 71	2,647
Families (5 persons.	151 276 276 741 888 511 172 147	3,830
Private]	persons.	39 305 375 859 1,017 1,097 550 179 104	4,678
Tumber of	3 persons.	128 530 481 906 937 1,044 538 193 101	4.945
4	persons.	326 919 533 782 672 841 334 47 47	4,591
	r person.	845 1055 1078 1088 1088 83	1,953
Number of Rooms	Tenement.	1 2 3 4 4 5 6 7 7 8 8 10 and upwards	Totals

It has not been possible when taking the Census to obtain information as to the size of the rooms occupied nor the age of This is a point which has to be taken into the inhabitants. calculation when considering overcrowding, but the basis adopted in the Census Returns is to count as overcrowded all Tenements

with more than two occupants per room.

At the Census of 1911 the total population of Southampton was 119,012, and the number of separate occupiers of all kinds 26,983. In 1901 the tenements with more than two occupants to a room numbered 370; in 1911 they amounted to 834. will be seen from the table given above there were 183 single-room tenements overcrowded, 257 of two rooms; 189 of three rooms; and 119 of four rooms. In 1901 there were 2,213 persons living more than two to a room, but in 1911 there were 5,705. The percentage was 2.1 in 1901, and 5.1 in 1911.

In 183 overcrowded single-room tenements 628 persons were found to be living more than two to a room in the following proportions:—128 at the rate of three to a room; 39 at four 9 at five; 6 at six, and in one case 7 to a room. An analysis o the figures for overcrowded tenements under five rooms show that there were altogether 748 cases of over two persons to single room, 101 of more than three, and 20 cases of more than

four.

The portion of the Housing, Town Planning, &c., Act, dealin with the provision of housing schemes for the working classe was referred by the Council to the Housing Committee. In orde that effect may be given to the resolution of the Council th Committee has from time to time considered the acquisition (sites for the erection of dwellings for the working classes, viz.:-

The site occupied by the old buildings in front of S Michael's House and the Council Buildings and bein

part of the Simnel Street area.

On land owned by the Corporation at Bitterne Pari close to the river and school. In connection with th the Borough Engineer was directed to submit plans an estimates for houses proposed to be erected on this sit

In dealing with the question of houses for the workers, the Committee had in view the accessibility of the site to the centr of industry which is a matter of considerable importance. main industry of the town is centred at the Docks, in which very large proportion of casual labour is employed. This cla of labour is large in proportion to the population when compare with other towns, and with whom the earnings are bound fluctuate and probably do not on the average exceed £1 per wee It is essential that this class of worker should receive primary consideration in any scheme of housing that may be provided. The provision of houses for any class of people at a rental of 5s. or more per week, inclusive of rates, would have little effect on the existing conditions, more particularly if the houses are situated at an unreasonable distance from the centres of employment unless exceptionally cheap, and quick means of transit is provided.

The idea usually associated with housing schemes is that they should be self-supporting, i.e., the rent paid by the tenant should cover interest and sinking fund charges, etc., and otherwise be carried on free of any charge on the rates. Any such financial arrangement as this will in the course of years put the Corporation in the position of being owners of property, which will have been paid for by the necessitous people they now propose to assist.

It was undoubted y the intention of the Legislature when framing the Housing, Town Planning, &c., Act, that the carrying out of such Act should be to some extent a charge on the rates, and this is borne out by the recent suggested State Grants in aid of such rate charges. It is very apparent that any Authority who is able to make financial adjustment, so as to provide and let houses at a rent that will cover all expenses will not participate in any part of this Grant.

The scarcity of houses in the Borough is responsible for high rents and consequent overcrowding, and often leads landlords who are over-run by applicants to shirk their responsibilities with regard to the condition of their houses. It frequently leads him to refuse tenants with families, and to cause the ejectment of tenants or the raising of their rents when the Sanitary Authority enforce the different provisions of the Public Health Acts, Housing, Town Planning, &c., Act, Notification of Births Act, or Tuberculosis Regulations, etc.

With regard to the question of casual labour it is interesting to compare Southampton with Portsmouth, in which there is a much smaller number of Common Lodging Houses, showing that although Portsmouth has double the population of Southampton the demand for Common Lodging House accommodation, which as a rule is occupied by this class of worker, is not half that provided in Southampton.

In Southampton with a population of 122,412, there are 19 Common Lodging Houses (including the Municipal Lodging House) accommodating 850 lodgers; in Portsmouth, with a population of 241, 256, there are only 12 Common Lodging Houses, with an accommodation for 373 persons.

HOUSING, TOWN PLANNING, &c., ACT, 1909.

During the year 1,185 houses were inspected under the provisions of the above Act.

The following is a list of streets in which systematic inspection was continued, the number of houses inspected, and the number of notices served.

HOUSE TO HOUSE INSPECTION.

	HO	USE	10	HOUSE INS	LOTTON.	
		** <u>**</u>	1		No. of Notice	es served.
Road or St	TREET.			Number of Houses Inspected.	Sec. 15, H.T.P. Act.	Public Health Act.
Barnfield Court	• • •	• • •		3	• • •	2
Bell's Buildings				5	•••	10
Birmingham Street	,			16	• • •	
Bond Street				54	• • •	44 11
Carlisle Road		• • •		20	• • •	
Cement Terrace	• • •	• • •		4	• • •	4
Coburg Street				13	•••	II
Coronation Terrace				5 8	• • •	5 6
Didcot Road					• • •	
Dock Street				53	• • •	47
Edward Road				4 I		27
Elm Street	• • •			28	• • •	19
Evans Street				7	•••	4
Henry Road				40	•••	26
Heysham Road				18	•••	14
Hill Street				21	2	17
Lion Street				19	•••	8
Lower Back-of-the		s		25		5
Mar Pood				1 TT	• • •	9 2 8
May Road	• • •			20	• • •	
Mount Street	• • •		• • •	7	• • •	5
Nelson Place			• • •	16	• • •	16
New Buildings	• • •	• • •	• • •	6	* * *	2
Newbury Road	• • • •	• • •		TO		9
Newman Street	 	• • •	• • •	25	• • •	24
Oxford Street, Shi		• • •	• •	20		12
Park Street	• • •	• • •	• •	1 10		9
Pope's Buildings	• • •	• • •	• •	108		45
Priory Road	• • •		• •	4		4
Regent's Place	• • •	• • •	• •	1		3
Regent Street	• • •	• • •	• •	15		13
Ryde Terrace	• • •	• • •	• •	7		6
St. George's Place	2	• • •	• •	. 16		16
St. Mary's Buildin	ngs	• • •	• •	. 84		45
Shirley Park Roa	.a	• • •	• •	6		6
Spa Court		• • •	• •	12		12
Spa Gardens			• •	12		IO
Spa Road	• • •	• • •	• •	•		14
Sussex Terrace		• • •	• •	14		12
Tower Place	• • •	• • •	•	13		17
Trinity Terrace		• • •	•			13
Vaudrey Street	• • •	• • •	•	23		14
Victoria Road	• • •		•	14		2
Villiers Road			•	4	* * *	2
Waterhouse_Cour		• • •	•	2 18	•••	1.4
Wellington Stree	t		٠	* *	•••	10
Western Terrace		• • •	•	15	•••	78
York Street	• • •			82	•••	
Total				1,100	2	710
1000						

Representations were made in respect of 21 houses as being in a state so dangerous to health as to be unfit for human habitation, and closing orders were made in each instance.

Seven closing orders were determined, one house voluntarily closed, and nine houses demolished; also closing orders became operative under Section 15 (4) with respect to six dwelling houses.

REPRESENTATIONS MADE WITH REGARD TO DWELLING HOUSES.

The following is a list of the houses, giving the situation, number of orders made, dates, &c.:—

Situation of Ho	use.	- Tomas	Date	•	Nature of Order made.	Further Action.
91, Grove Street 92, do. 92½, do. 93, do. 94, do. 95, do. 1, Barnfield Court 3, do. 4, do. 64, Arthur Road Loosemore Cottage, Ch 49, Grove Street 50, do. 51, do. 136, Dukes Road 138, do. 140, do. 3, Howards Grove 4, do. 98½, Northam Road 2A, Wharf Street			Feb. do. do. do. do. do. do. do. do. do. d	3 4 9	Closing Order do. do. do. do. do. do. do. do. do. do	Closing Order determined do. do. do. do. do. do. do. do. do. do

SUMMARY OF DEFECTS REMEDIED IN CONNECTION WITH INSPECTIONS MADE UNDER THE HOUSING, TOWN PLANNING, &c., ACT, 1909.

Drains	re-constructed	• • •		 • • •	76.
,,	cleansed and repaired	* * *	• • •	 • • •	35
	re-trapped				
Plant .	intercepted from sewer a			 	32
Inspec	tion chambers provided to	a house d	rains		12

Water closets re-constructed	• • •	• • •	• • •		106
New pans fixed in water closets		• • •	• • •		124
Water laid on to water closets	• • •		• • •		50
Ventilating shafts of house drains re					I
Bath sink waste-pipes, stack-pipes,	&c., d	isconne	ected fi	rom	
Bath sink waste-pipes, stack pipes,	•••		• • •		76
the drains Light and ventilation provided to w		losets			53
Light and ventuation provided to a					83
Sallitat v Silik liaco		• • •	• • •		371
Dampness in dwelling houses remed Houses cleansed and whitewashed					418
Houses cleansed and wintewasned		• • •			171
Roofs of houses repaired	red	• • •			338
Flooring, walls, &c. of houses repair	to opei				425
Window sashes repaired and made	ted ted				239
Rooms of houses efficiently ventilate	•••	• • •			50
					254
Ground floor ventilation provided u	naired	001110			142
Eaves guttering and stack-pipes rej	parreci				160
Yards paved and drained	• • •				III
Yard paving repaired	• • •	• • •			128
Sanitary dustbins provided	• • •	• • •	• • •		

THE RAG FLOCK ACT, 1911.

Six samples of rag flock were taken and submitted to the Public Analyst, the result being as follows:—

No. of Sample.	Result of Analysis.							
I	Chlorine as	Chlorides,	9.7 pa	rts per	100,000			
2	,,	,,	7.08	,,	,,			
3	,,,	,,	14.10	,,	,,			
4	,,	,,	7.1	,,	,,			
5	,,	,,	4.37	,,	,,			
6	,,	,,	8.87	;;	,,			

SHOPS ACT, 1912 AND 1913.

During the year the Shops Act, 1912, has been amended in its application to premises for the sale of refreshments by the Shops Act, 1913.

The Act is an adoptive one, and the occupier of such premises may by a statutory notice hung in a conspicuous place elect that the following provision shall apply:—

- (a) No assistant shall be employed for more than sixty five hours in any week, exclusive of meal times.
- (b) Provision shall be made for securing to every such assistant—
 - (i) Thirty-two whole holidays on a week-day in every year, of which at least two shall be given within the currency of each month, and which shall comprise a holiday on full pay of not less than six consecutive days;

(ii) Twenty-six whole holidays on Sunday in every year, so distributed that at least one out of every three consecutive Sundays shall be a whole holiday:

Provided that two half-holidays on a week-day shall be deemed equivalent to one whole holiday on a week-day.

(c) Intervals for meals shall be allowed to every such assistant amounting on a half-holiday to not less than three-quarters of an hour, and on every other day to not less than two hours, and no assistant shall be employed for more than six hours without being allowed an interval of at least half-an-hour:

Provided that this provision shall not apply if the only persons employed as such shop assistants are members of the family or the occupier of the premises

maintained by him and dwelling in his house.

(d) The occupier shall affix and constantly maintain in a conspicuous position in the premises a notice in the prescribed form referring to the provisions of this Section and stating the steps taken with a view to compliance therewith.

The notice may be withdrawn by the occupier of the shop at the expiration of a year from the date when it was given and thereafter Section I of the Shops Act, 1912, shall apply to the shop in like manner as before the notice was given.

A Closing Order with respect to Butchers' Shops came into operation in the Borough, October 10th, 1913.

Eleven hundred and fifty visits were made and proceedings instituted in II cases for breaches of the Act, as follows:—

Name.	Situation.	Date Summons Return- able.	Offence.	Result of Proceedings.
A.D.N.	Sidford Street	Jan. 3	Selling non-exempted articles after 1 p.m.	Fined 5s., including costs
H.P.	High Street	Feb.10	on early closing day Not exhibiting assist- ants weekly half- holiday notice	Ordered to pay the costs of the Court (4s.), on giving an undertaking to comply with the Act in future
E.P.	Do.	Do.	Obstructing Inspector	Fined 5s. and 9s. costs
L.D.P. A.M.	Do. Northam Road	Do. Mar. 3	Do. Selling non-exempted articles after 1 p.m.	Do. Fined 2s. 6d., including costs
H.K. & Co.	St. Mary's Road	June 5	on early closing day Employing a young person more than 74 hours in one week	Fined ros. and 5s. 6d. costs
G.A.P.	Oxford Street	July 17	Selling non-exempted articles after 1 p.m.	Case dismissed
Ė.A.G.	Portswood Road	July 29	on early closing day Do.	Fined ros. and ras. 6d. costs
F.R.	Orchard Lane	Do.	Do.	Fined ros., including costs
R.M.	Bevois Valley Road	Nov. 24	For failing to exhibit exemption notice on	
E.G.C.	Millbank Street	Do.	early closing day Do.	Fined ros. and 6s. 6d. costs

Factory and Workshops Act, 1901.

There are 837 Factories, Workshops and Workplaces, Bakehouses, and Laundries on the Registers.

They give employment to 5,353 workers, 3,660 males and 1,693 females, as compared with a total of 5,240 in 1912.

SUMMARY OF VISITS.

Factories			• • •	• • •	• • •	71
Workshops a	nd We	orkplace	S	• • •		I,444
Bakehouses (includ	ling Fac	tory l	Bakehou	ises)	562
Laundries (in	ncludi	ng Facto	ory L	au n dries	s)	90
Visits re San	itary l	Matters	• • •			654
	v				4	
	,	Total				2,821

FACTORIES.

Trade.	No. on Register.	Emple Male.	Female.	Total.	No. of Visits.
Antiseptic Factory Bedding Factories Blacksmiths and Coachbuilders Boot Makers and Repairers Bottle Washing Factories Brass and Iron Founders Brickyards	I 2 1 17 1 4 1 16 5 3 2 8 2 9 1 1 2 16 6 1 1 2 10 1 7 4 2 7	3 7 7 52 6 48 20 44 274 19 45 5 52 22 82 1 8 35 70 48 60 311 28 13 945 101 32 41	3 16 2 5 22 11 26 	3 11 7 55 6 48 20 60 274 19 45 7 57 44 82 12 8 35 70 74 60 311 28 39 945 101 32 41	I 2 2 10 I I I I I I I I I I I I I I I I I I
Totals	119	2082	115	2197	71

NUISANCES ABATED IN FACTORIES.

Sanitary Conveniences provided (separate for	•
sexes)	I
Sanitary Conveniences properly separated	
from Factory	I
Sanitary Conveniences lighted and venti-	
lated	2
Water closets re-constructed	I
cleansed and limewashed	I
New cisterns and flush-pipes fixed	3
Means of flushing provided to urinal	2
Total	ΙΙ

WORKSHOPS.

VV	U	ROIL	1 01			
		No. on	Emplo	yees.	Total.	No. of Visits.
Trade.	F	Register.	Male.	Female.	Total.	VISICS.
Blind Makers Boot Makers and Repairers Brickmakers Brush and Basket Makers Building Trades Cabinet Makers and Upholsterers Carpets and Upholstery Needle workers Clay Tobacco Pipe Maker Confectioners and Sugar Boilers Coopers Cork Maker Cycle Makers and Repairers Dressmakers and Milliners Dyers and Cleaners Electricians and Engineers		1 1 2 5 112 9 10 2 1 5 12 2 3 6 6	3 141 8 92 14 9 162 93 5 4 6 2 41 17 3 1 9 4 1 3 22 5 3 14 10 20 11 67 3 29 18 1 17 166 14 35 4 2 11 32 12 12 33 22		3 141 8 92 14 9 162 100 25 6 10 2 41 743 5 17 7 1 9 4 2 3 22 43 10 20 27 117 10 29 18 1 6 17 404 14 35 4 4 11 32 12 20 33 22	I 82 3 70 3 8 42 36 17 2 6 2 3 4 I I I 3 I 9I 2 2 III 3 9 287 83 3 II I 3 4 I I 5 5 16 2 7 11 2
Totals	••	. 559	1183	1151	2334	1444
				h a moor	48	

NUISANCES ABATED IN WORKSHOPS.

Sa	nitary conveniences provided	to Work	shops	• • •		3
	Ditto		T .	for sexes		2
In	sanitary privies abolished		*			2
Dr	ains re-laid, trapped and vent	ilated				2
	,, cleared and repaired .					I
W	ater closets re-constructed .	• • • • • •				8
	,, impervious floors l					I
$N\epsilon$	ew soil-pipes fixed	• • • • •				2
Ne	ew cisterns, flush-pipes, &c., fix	xed				4
$D\epsilon$	efective roofs repaired .					2
	,, ceiling repaired .			• • •		I
	ives guttering and stack-pipes					I
	ew sinks and waste-pipes fixed					2
	ards paved or repaired					4
W	orkrooms cleansed and limewa	ashed	• • •			23
	ccumulations of offensive matte		ved			6.
Sn	noke nuisance abated	• • • • •				I
Ot	her nuisances	• • • • •				5
						—
	Total .	• • • • •			• • •	70

REPORTS RECEIVED FROM H.M. FACTORY INSPECTOR.

Sixty-three reports were received from the Factory Inspector during the year, viz.:—

Nature of Report.	No. sent in.	Action taken.
New Workrooms or Change of Address	19	Premises inspected, Rooms Measured, &c
Workshops Notified (already on L.A. Register or re-notified after Notice from Local Auth- ority)	29	No action taken
Sanitary Defects	15	Defects remedied
Total	63	

NOTIFICATIONS SENT TO H.M. FACTORY INSPECTOR.

Sixteen notifications have been forwarded to H.M. Inspector of Factories during the year respecting new workshops, change of address, or infringements of the Factory and Workshops Act.

INFECTIOUS DISEASE OCCURRING ON WORKSHOP PREMISES DURING THE YEAR.

Date.		Disease.	Street.	Trade.	Action taken.
Jan.	II	Scarlet Fever	Palmerston Road	Tailoring	Patient removed to the Isolation Hospital. Premises, bedding, &c., disinfected, also Tailoring Work in house at time. The father of patient (a master tailor) was bathed and disinfected at West Quay.
Mar	I	Scarlet Fever	Oxford Street	Baker & Confectioner	Patient removed to the Isolantion Hospital, and premises bedding, &c., disinfected
Oct.	3	Scarlet Fever	Bellevue Road	Dress- making	Do 4
Nov	10	Diphtheria	Do	Do.	Patient isolated at home, and premises, bedding, &c., dis infected after recovery cocase
Nov.	14	Diphtheria	St. Mark's Road	Tailoring	Do.

CASES OF INFECTIOUS DISEASE OCCURRING IN HOME! OF EMPLOYEES OF FACTORIES AND WORKSHOPS.

Three cases of Scarlet Fever and eight cases of Diphthericoccurred in homes of persons employed in Factories and Workshops during the year.

Nine of these cases were removed to the Isolation Hospita and two were isolated at home.

All premises in which cases occurred were disinfected an bedding removed for disinfection after the removal of patient to Hospital, or on recovery when isolated at home.

The workers living in the houses in which Scarlet Fever cases occurred received a disinfecting bath and had their clothed disinfected before resuming duties.

In the case of Diphtheria, the workers residing in the houses ad their throats bacteriologically examined, and were not llowed to return to work unless the result was negative.

HOME WORK.

During February 52 lists were sent in containing names and ddresses of 160 outworkers, and during August 54 lists containing ames and addresses of 160 outworkers.

They are situated as follows:—

		-				February.	August.
own District						109	106
ortham and Chape						IO	9
evois Town, Ports	wood a	nd St.	Denys			18	22
eemantle and Shi	rley	• • •				19	rS
ıtside District		* * *		•••	•••	4	5
	Tota	ıls	•••		•••	160	160

Of the 160 names received in August, 52 occupy premises gistered as workshops employing labour, and of the remainder siding in the Borough 74 carry on tailoring work, 9 bootmaking, id 21 upholstery and fancy needlework, underwear, &c.

The names and addresses of the outworkers living outside e Borough have, in accordance with Section 107 of the Factory d Workshops Act, been forwarded to the Authorities of the strict in which they reside.

Two hundred and three visits of inspection have been made ring the year to outworkers' premises and six nuisances abated.

Nuisances Abated.

Water closet re-constructed Workrooms limewashed		• • •		
Total	• • •	• • •	• • •	6

BAKEHOUSES.

The tendency at the present time towards installing moto power in Bakehouses renders the definition of a factory in the Factory Act of 1901 of much greater importance to Loca Authorities than it was at the date of the passing of the Act.

In Southampton, where electricity for motor power supplied at a cheap rate, many of the bakehouses have introduced motors for mixing the dough. The result is that such bakehouses have become factories as defined by the Factory Acand the Local Authority have only power to deal with:—

- (1) Means of escape in case of fire.
- (2) Take action under the Public Health Act when the Factory Inspector reports defective sanitary conveniences.

It follows therefore that premises in which the chief are most essential food of the people is prepared and stored the Sanitary Authority have to all intents and purposes ceased have any effective control and supervision, This lack of supervision will in many cases lead to very undesirable conditionarising in the sanitary state of bakehouses.

The same remarks apply to Slaughterhouses, in which to installation of a motor for the manufacture of sausages or form mincing machine for potted meats, etc., would constitute supremises a factory, and make any essential sanitary supervisibly the Local Authority impossible.

It is therefore necessary in order to prevent friction at overlapping and to remove any objection to direct action on the part of the Sanitary Authority that they should be given for power of enforcing the statutory requirements and of dealing with all insanitary conditions both under the Public Health Aland Factory Acts.

There are 126 Bakehouses on the Register, 18 being Factor (i.e., using mechanical power) and 108 workshops.

Ninety-eight of these were in use at the end of the year, a were unoccupied.

They give employment to 318 male employees.

Five hundred and sixty-two visits of inspection have been nade during the year, resulting in the detection and abatement of 26 nuisances.

All occupied Bakehouses were re-limewashed during the nonths of April and October in accordance with the Regulations.

During the year one new business commenced at 9, Romsey Road, where the occupier has installed a small portable oven.

TABLE C.—Bakehouses.

					No. on Register.	Empl	oyees.	Total.	No. of Visits.
						Male.	Female.		
`actories	* * *	* • •	0 0 0		18	110	•••	IIO	54
Vorkshops	• • •	•••	• • •	•••	108	208	• • •	208	508
	Totals		• • •	•••	126	318	• • •	318	562

Nuisances Abated in Bakehouses.

Orains repaired		• • •	• • •		I
Vater closets re-constructed	• • •				. 2
,, lighted and ventilated		• • •		• • •	I
,, impervious floors laid		•,• •			I
New cisterns, flush-pipes, &c., fixed				• • •	I
Caves guttering and stack-pipes fixed					I
Roofs repaired					I
1					2
Damp walls remedied	• • •				I
Extra light and ventilation provided	• • •			• • •	I
Bakehouses cleansed and limewashed	• • •				4
Tards paved or repaired	• • •				2
table paving repaired					2
ccumulation of offensive matter rem	oved			• • •	6
Total			• • •		26

LAUNDRIES.

There are 34 Laundries on the Register, one having lapsed during the year.

Twelve of these use mechanical power and 22 manual labour

They employ 77 male and 427 female workers.

Ninety visits of inspection have been made and three nuisance abated during the year.

Means of escape in case of fire was provided in one. Factor, Laundry.

TABLE D.—Laundries.

-					No. on Register.	Empl	oyees.	Total.	No. of Visits.
	0				Register.	Male.	Female.	Total.	V 151t5.
Factories	•••	• • •	• • •	• • •	12	61	299	360	7
Workshops	• • •			•••	22	16	128	144	83
	Total	s	•••		34	77	427	504	90

Nuisances Abated in Laundries.

New cisterns and flush-pipes, &c., fixed		
Water-closet cleansed and limewashed	• • •	 •••
		-
Total		

VISITS re SANITARY MATTERS.

In addition to the foregoing, 654 visits have been made during the year, comprising re-visits to Factories, Workshops, Bake houses and Laundries, serving notices, investigating complaint overcrowding, and various other matters.

The five following tables are inserted by request of the Secretary of State.

FACTORIES, WORKSHOPS, WORKPLACES AND HOMEWORK.

1.—INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

		Number of			
Premises.		Inspections.	Written Notices.	Prosecutions.	
Factories (including Factory Laundries)	• • •	132	10	•••	
Workshops (Including Workshop Laundries)	•••	1952	39	•••	
Workplaces (Other than Outworkers' premises cluded in Part 3 of this Report)		83	I		
Total	• • •	2167	50		

2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

	Num	Number of Prosecu-		
Particulars.	Found.	Remedied.	Reported to H.M. Inspector.	tions.
Nuisances under the Public Health Acts:—				
Want of Cleanliness	27	27	• •	
Want of Ventilation	ı	I	• •	• •
Overcrowding	• •	• •	• •	• •
Want of drainage of floors		• •	• •	• •
Other nuisances	64	64	• •	••
(insufficient . unsuitable or	. 3	3	• •	••
accommodation defective .	_	13	• •	••
not separate for sexes	. 3	3	• •	• •
OFFENCES UNDER THE FACTORY AND WORKSHOP ACT:—		7		1
Illegal occupation of underground bakehouses (s. 101)			• •	••
Breach of special sanitary require ments for bakehouses (ss. 92 to 100)	- 7 • • • •			
Other Offences (Excluding offences relating to outwork which are included in Part 3 of this Report)	o d			••
Total	111	III	• •	

T	7	1
	- 1	~<
_	_	

					115	5								
, 110.	.(suoitus	Prosections)	(91)	•		:		Number. (2).	~		10 . 1		2
PREMISES, TIONS 109,		nade :o).	Orders i	(15)	•	:			Nun (3	13		H. H.	- ·	7
SECTIONS		.səc	onstanI	(14)	•					rkshop	but rgor):	ector	• •	•
.8s, ro8.		'suo	Prosecuti	(13)	•	•	:	MATTERS		actories and Wo	h. Acts, but Act (s. 5, 1901	M. Insp	•	
PREMISES, SECTION 108.		ces.	itoV vrse	(12)	•			MAT		or of Factory	Healt Kshop	t to H.]):— Vear	
SE		rces.	stanI	(11)	•	:		OTHER	Class. (r)	Inspector of Factories: of the Factory and Work	referred Public nd Wor	ector.	(s. roi	year .
	tions.	Koiling	to send Lists.	(01)	•	•	•	5.—01	Ö	to H.M. Abstract	matters under the Factory a	H.M. Ínsp oction tak	akehouses	nd of the
, TO7.	Prosecutions.	Failing	or permit inspec- tion of Lists.	(6)	:	•	•			Matters notified to H.M. Inspector of Factories:— Failure to affix Abstract of the Factory and Workshop Act (s. 133, 1901)	Action taken in matters referred by fr.m. hispector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s. 5, 1901)	Notified by H.M. Inspector Reports (of action taken) sent to H.M. Inspector	Underground Bakehouses (s. 101):—	In use at the end of the year
SECTION		Notices served on		(8)	7	•	7			Matter Failu Act	Actio as rei	Red	Underg	In us
LIS13,	ers.		Outworkers Workmen)	(2)	91	•	9I		Number. (2)	559	Ros	22		680
OUTWORKERS	Lists received from Employers.	Sending once in the year.	Outworkers Contractors)	2) @	•	:		S.			•	•		
VOKK	rom E	S	Lists.	(5)	+	•	4	HOF	he yea	•	•			ter
ALOO	ived fi	he	Notkinen) Votkinen)) 3	289	15	304	WORKSHOPS	ıd of t	•	•			Register
	s recei	Sending twice in the year.	ontractors)	(C)		• •		W	the er		•	•		no sac
	List	Setwic	Lists.	(2)	86	4	102	RED	31) at	•	•	•		of Workshop
			٠		0	*		STE	er (s. 1 (1)	•	•	•		of W
		WORK.			•	stery		REGISTE	Regist		•	•		umber
И		OF 1		(1)	rel	uphols	al	4.	n the	•	•	•		otaln
		NATURE)	Wearing Apparel— (1) making, &c.	Furniture and upholstery	Total	,	Workshops on the Register (s. 131) at the end of the year.	Workshops	Bakehouses	Laundries		Τ,

SYNOPSIS OF TABLES.

- TABLE 1.—Showing births and birth-rates for the whole Borough and various Districts for eleven years, 1903-1913.
 - " 2.—Showing deaths and death-rates for the whole Borough and various Districts for eleven years, 1903 1913.
 - " 3.—Deaths from all causes at subjoined ages in the Borough of Southampton, from 1904-1913.
 - ,, 4.—Causes of death in Southampton for ten years, 1904-1913.
 - ">
 5.—Showing population, birth-rates, death-rates, zymotic death-rates, infantile mortality, and marriage rates in Southampton and England and Wales for twenty years, 1894-1913.
 - ". Table prepared in accordance with Local Government Board's instructions. Showing population, births, and deaths for ten years.
 - ">
 7.—Ditto. Showing cases of infectious diseases notified during 1913, classified according to ages and localities, and the number removed to Hospital.
 - 8.—Ditto. Showing deaths occurring in 1913. Classified according to diseases and ages.
 - ,, 9.—Causes of deaths in Municipal Wards during the year 1913.
 - " 10.—Deaths from zymotic diseases for five years.
 - ", II.—Showing in detail causes of, and ages of all deaths of persons belonging to the Borough of Southampton during the year 1913.
 - ", 12—Showing marriage rate, birth-rate, death-rate, zymotic death-rate, and infantile mortality in the registration districts of the Borough for the year 1913.
 - .. T3.—Showing number and description of cases of infectious disease notified to the Medical Officer of Health in each of the four quarters of 1913.
 - 14.—Showing all diseases notified during the past ten years, and the number of them admitted to Hospital.
 - " 15.—Vaccination returns for the Borough.
 - Office, Southampton, during the year 1913, together with averages for ten years.

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TABLE 1.

SHOWING BIRTHS AND BIRTH RATES FOR WHOLE BOROUGH, AND THE OLD CIVIL PARISHES OF THE BOROUGH, FOR 10 YEARS—1903-1912, COMPARED WITH THE YEAR 1913.

X 7	7	Whole Bo	orough.		Town I	Proper.	Ports	vood.	Freen	ley, nantle llbrook.
Year.	Males.	Females	Total Births.	Birth Rate.	Total Births.	Birth Rate.	Total Births.	Birth Rate.	Total Births.	Birth Rate.
*1903 1904 1905 1906 1907 *1908 1909 1910 1911	1638 1502 1428 1495 1438 1537 1511 1546 1430	1527 1501 1440 1418 1319 1434 1427 1380 1419 1363	3165 3003 2868 2913 2757 2971 2938 2926 2849 2806	29.40 27.53 25.96 26.03 24.33 25.41 25.30 24.89 23.94 23.29	1718 1677 1572 1589 1506 1646 1584 1581 1536 1493	27.4 27.1 25.4 25.6 24.1 25.8 25.2 25.1 24.3 23.5	583 525 543 550 480 553 524 561 545 511	30.2 27.1 27.4 27.1 23.2 26.1 24.2 25.4 24.2 22.1	864 801 753 774 771 772 830 784 768 803	31.2 28.7 26.2 26.3 25.5 24.5 26.2 24.1 23.1 23.7
Average 10 years.	1497	1423	2920	25.61	1590	25.4	538	25.7	792	26.0
*1913	1495	1462	2957	25.78	1543	23.70	579	24.13	835	23.70

^{*53} weeks.

TABLE 2.

SHOWING DEATHS AND DEATH RATES FOR THE WHOLE BOROUGH, AND THE OLD CIVIL PARISHES OF THE BOROUGH, FOR 10 YEARS—1903—1912, COMPARED WITH THE YEAR 1913.

3.7	7	Whole Bo	orough.		Town I	Proper.	Portsv	vood.	Freer	rley. nantle llbrook.
Year.	Males.	Females	Total Deaths	Death Rate.	Deaths	Death Rate.		Death Rate.	Deaths	Death Rate.
*1903 1904 1905 1906 1907 *1908 1909 1910 1911	808 804 901 796 793 819 848 764 986 842	714 747 767 748 752 771 764 693 837 745	1522 1551 1668 1544 1545 1590 1612 1457 1823 1587	14.14 14.22 15.10 13.80 13.63 13.60 13.88 12.39 15.23 13.17	955 931 1026 926 961 991 988 875 1046	15.2 15.1 16.6 14.9 15.4 15.5 15.7 13.9 16.6	203 245 253 242 208 237 229 215 276 269	10.5 12.6 12.8 11.9 10.0 11.2 10.6 9.7 12.2 11.6	364 375 389 376 376 362 395 367 491 381	13.1 13.4 13.6 12.8 12.4 11.5 12.4 11.3 14.8
Average 10 years	836	754	1590	13.0	964	15.4	238	11.3	388	12.7
*1913	845	759	1604	12.90	928	14.2	274	11.4	402	11.4

^{*53} weeks.

TABLE 3.

Table Showing Deaths of Persons belonging to Southampton, classified according to ages for 10 years.

Year.	At all Ages.	Under 1 Year.	ı and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.
1904 1905 1906 1907 1908 1909 1910 1911 1912	1551 1668 1544 1545 1590 1612 1457 1823 1587 1604	344 382 330 298 336 312 231 384 237 241	134 214 121 98 112 113 100 124 120	49 72 67 59 40 51 61 62 58 71	66 68 54 41 59 59 48 46 66	485 493 531 556 557 564 535 643 607 609	473 439 441 493 486 513 482 564 499 530

TABLE 4.

Causes of Deaths in Southampton for 10 years, 1904 to 1913.

		-				-				10
Cause of Death.	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
										,
Enteric Fever	I	8	5	4	4	IO	10	3	8	61
Small Pox		4		2						•••
Measles		130		5	22		17	13	18	301
Scarlet Fever	I	IO		2	4	5	2	5	2	21
Whooping Cough	16	19	36	18	35	42	ΙI	18	35	IOI
Diphtheria and Croup	12	26	24	22	16	19	16	23		301
Influenza	7	15	9	26	II	19	19	17	17	201
Erysipelas	3	2		6	I	2	4	3	3	•••
Phthisis (Pulmonary Tuberculosis)		135	154	126	135	158	145	188	_	_
Tuberculous Meningitis	24	28	19	13	10	23	23	24		191
Other Tuberculous Disease	31	32	32	37	29	20	30	27		17!
Cancer, malignant disease	106		102	125	ł	105	135	125	109	- 1
Rheumatic Fever	4	5	4	5	3	7	4	3	6	2
Meningitis	16	19		18			10	14		14
Organic Heart Disease	126		_	151		_		158		158
Bronchitis	157	143		1 .		135	108	126		137
Pneumonia (all forms)	90	125	92	96	85	112	. 83	129	103	88
Other Diseases of Respiratory		1								1
Organs	20	14		23		17		23	27	27
Diarrhœa and Enteritis	93			59	1	63			39	
Appendicitis and Typhlitis			_	-	2	8	1	1		}
Cirrhosis of Liver	21	0	_				1	17	15	
Alcoholism	6		_	1	1	4				I
Nephritis and Bright's Disease	42	,		1						52
Puerperal Fever	3	2	6	2	4	2	2	2	2	2
Other accidents and Diseases of			-							8
Pregnancy and Parturition		I	6	3	7	5	5	4	IO	U
Congenital Debility and Malformation, including Premature Birth		T 2 4	106	T 2.4	T20	T.0 =	IIO	127	88	1131
Violent Deaths, excluding Suicide	30] 01			1	1 -		
Suicida		1					1	1		
Other Discours	1)						440
Other Diseases	432	425	444	417	467	462	437	409	4/-	
Totals	1551	T668	1544	T545	T500	1612	T 457	T823	T587	1604
10003		1000	1344	1545	1390	1012	1437	1023	1507	
	_			1				1		

TABLE 5

SHOWING POPULATION, BIRTH RATES, DEATH RATES, ZYMOTIC DEATH RATES, INFANTILE MORTALITY, AND MARRIAGE RATES IN SOUTHAMPTON AND ENGLAND AND WALES FOR TWENTY YEARS, 1894-1913.

ŝ	Marriage Rate	and Wales.	15.0	15.0	15.8	0.91	16.2	16.4		15.9		S		15.3	Š		4	I4.6		\$	15.5	5	
Marriages.	Marri-	Rate	17.6	18.8	17.8	17.6	0.91	17.7			٠	٠			+						16.4	6.	
	Total Marri	ages.	617	675	838	848	162	896	846	918	996	883	859	827	805	827	867	928	773	914	066	1032	
Infantile fortolitu	under i er 1000 gistered	England & Wales.	137	191	148	156	191	163	154	S	133	132	146	128	133	811	121	601	901	130	95	601	
Infantile	Deaths under I year per 1000 Births Registered	South- ampton.	611	155	146	156	153	178	152	154	124	114	114	133	113	108	113	901	79	135	84	82	
ths.	Zymotic Death Rate	and wales.	I.88	6	Ĭ.	2.15	3	Ĭ.	9.	0	9.	4.	.9	5	1	2	I.34	H.	0.99	2.49	•	•	
Zymotic Deaths.	Zymotic	Rate.	1.14	1.53	2.04	2.24	2.63		1.51	•	I.64	I.50		2.49	•		I.33	1.20	۰	I.85	0.94	0.98	
Zyı	Total	Zymotic Deaths.	81	III	192	217	267	297	163	173	174	165	123	275	691	112	156	139	94	220	II3	122	
	Death Rate	Rate. and Wales.	16.6	18.7	1	17.4	17.6	∞	18.3	6.9I	16.3	15.4	16.2	15.2	15.4	15.0	14.7	14.5	13.4	14.6	13.3	13.7	
Deaths.	1) oo (1	Rate.	6.	∞		17.3					15.7	4	+	Š	3.	3.	3.		3	Š	13.2	2	
	Total	Deaths	1,161	1,395	1,657	1,711	1,756	1,992	1,881	1,789	1,726	1,557	1,590	1,735	1,611	1,572	1,642	1,694	1,554	1,847	1,587	1,604	
	Birth Rate	and Wales.	29.6		÷	_	_	29.3	00	∞	α	00				9	5.	25.6	·	24.4		23.9	
Births.	Birth		3	30.	30.	3	29.	29.	28.	30	29		27	26	61	24	25	25	24	23	23.3	23	
	Total	DILLIIS	2,113	2,180	2,859	2,937	2,945	2,995	2,929	3,141	3,152										2,806	2,957	
	Popu- lation.		70,000	71,750	94,150	96,500	98,950	101,350	103,500	105,179	109,901	108,022	109,444	110,865	112,287	113,708	115,130	116,551	117,973	119,394	0,89	CA	
	Year.		1894	1895	1896	1897	*1898	1899			1902	903		905	906	907		909	016	116		*1913	

Note.—The Zymotic Deaths and Death Rates include the seven principal Zymotic Diseases, viz.—Whooping Cough. Measles, Diarrhæa, Diphtheria, Scarlet Fever, Typhoid Fever and Small Pox.

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TABLE 6.

VITAL STATISTICS OF WHOLE DISTRICT DURING 1913 AND PREVIOUS YEARS.

				ΙI	8						,
ç	ages.		Rate.	13		13.60	13.88	12.39	15.23	13.17	12.90
belonging tstrict.	At all		Number.	12		1,590	1,612	1,457	1,823	1,587	1,604
Nett Deaths belonging to the District.	ear of age.	Rate per	Nett Births.	II		113	901	79	135	84	82
Net	Under I year of age.		Number.	01		336	320	236	384	237	241
Transferable Deaths.	of Resi-	dents not registered	District.	6		36	•	67	46	54	45
Transi Dea	of Non-	residents registered	District.	8		88	82	66	70	96	16
Deaths d in the	net.	and the	Rate.	7		14.04	14.58	13.22	15.52	13.52	13.27
Total Deaths registered in the	Disti		Number.	9		1,642	1,694	1,554	1,847	1,629	1,650
on CEMPER OF	tt.	N. A.	Rate.	5		25.41	25.30	24.89	23.94	23.29	23.78
Births.	Nett.		Number.	4		2,971	2,938	2,926	2,849	2,806	2,957
		Un-	corrected Number.	3		2,971	2,938	2,926	2,849	2,801	2,951
	Population estimated	to middle of each	Year.	73		115,130	116,551	117,973	119,394	120,891	122,412
	ATTACAMENTAL SE	Year.	endar an Augusta	н		8061	606I	oi6i	1161	1912	1913

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1913.

- al.	er e	Total cases soH of beyom	1	580
				•
		St. Deny's.	74 1 8 8	100
T ₂	;	Portswood.	7117.2 17	II5
Total Cases Notified in each Municipal Ward	3	Shirley.	688 52 .	115
icipa		Millbrook.	3 35 · · · · · · · · · · · · · · · · · ·	84
Mun		Freemantle.	51 KL 0 4	62
each		Banister.	$\vdots \qquad \vdots \qquad$	37
ed in		Bevois.	1	78
Notifi		All Saints.	.:: 04 ti	75
ases 1		Newtown.	0 H 8 . 7	29
tal C		Trinity.	2 2 1	81
To	1	Northam.	40 66 30 10 10 10 10 10 10 10 10 10 10 10 10 10	157
		St. Mary's.		108
		.nwoT	48 E. 9 . 1 2	211
		65 and upwards.		13
èd.		45 & under 65 years.	ng 69 m	98
otifie	rs.	25 & under 45 years.	1 4	271
rses r	-Years.	15 & under 25 years.	88 880 880	126
Number of Cases notified.	Ages-	5 & under 15 years.	54 1	1
nber	At 1	1 & under 5 years.	22 10	144 526
Nun		Under r.	4ан о	13
		At all Ages.	1	1611
		Notifiable Disease.	Small pox Cholera Plague Diphtheria (including Membranous Croup) Erysipelas Scarlet Fever Tyhpus Fever Continued Fever Continued Fever Puerperal Fever Puerperal Fever Cerebro-spinal Meningitis Poliomyelitis Pulmonary Tuberculosis Other Forms of Tuberculosis	Totals I

TABLE 8.Causes of, and Ages at Death during the year 1913.

	"R	ett Desider	its,"	at t whet hout	her o	ccur	ring v	Ages within	of n or	in Institu- District.
Cause of Death.	All Ages	Under 1 year.	r and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and upwards.	s e
All Causes—Certified —Uncertified	1604 ••	241	57	44	71	53	232	377	530	
Enteric Fever	6					3	3			8
Small Pox										
Measles		10	II	7	2					9
Scarlet Fever Whooping Cough		6	I	I		• •			• •	2
Diphtheria and Croup	10 30	0	3	7	18	2	• •	• •	• •	24
Influenza	20		I		I		5	6	7	24
Erysipelas										
Phthisis (Pulmonary Tuber-culosis)	7.50		-		6		60	.0		
Tuberculous Meningitis	150 19	2	1 4	! 4	6	22 I	69	48	• •	55
Other Tuberculous Diseases	17	3	I	I	3		5	4		5 11
Cancer, malignant disease	139				I		15	67	56	48
Rheumatic Fever					I	• •	I			I
Meningitis Organic Heart Disease	14	3	2	2	3 2	I	1 20	2	81	5
Bronchitis	137	25	3	4			5	54 21	79	29 34
Pneumonia (all forms) Other diseases of Respiratory	88	20	6	3	2	2	II	24	20	24
Organs	27 55	30	14	3	3	I	I	9 2	II	6
Appendicitis and Typhlitis	12	30			2	5	2	I	5 2	14 14
Cirrhosis of Liver	16						4	7	5	6
Alcoholism	I					• •		I		
Nephritis and Bright's Disease Puerperal Fever	52		• •	• •	• •	2	8 2	18	24	20
Other accidents and diseases of	~	• •	• •	• •	• •	• •	4	• •		3
Pregnancy and Parturition .	8					I	7			3
Congenital Debility and Mal-								-		
formation, including Premature Birth	113	III	I			7				7.0
Violent Deaths, excluding	113	111	1	• •	• •	I		• •	• •	10
Suicide	49	4	I	• •	8	I	14	II	IO	25
Suicide	7		• •	• •	• •	• •	3	4	٠.	I
Other Defined Diseases Diseases ill-defined or unknown	431	24	4 2	4 I	II	8	55	97 I	228	211
					••!			1	2	•••
	1604	241	57	44	71	52	232	377	530	571
SUB-ENTRIES—			1		1		y			
Cerebro-spinal Meningitis	I	• •	• •			I		0		I
Poliomyelitis Pneumonia (other than	• •	• •	• •	• •	• •	• •	• •	• •	••	••
Broncho-pneumonia)	61	7	2	3	2	2	9	21	15	22

TABLE 9.

CAUSES OF DEATH IN THE MUNICIPAL WARDS DURING THE YEAR 1913.

					N	Iunic	CIPAL	WAF	RD.					resi- oro'.	
Causes of Death.	Town.	St. Marys.	Northam.	Trinity.	Newtown.	All Saints.	Bevois.	Banister.	Freemantle.	Millbrook.	Shirley.	Portswood.	St. Denys.	*No settled residence in Boro'	Total Deaths.
eric Fever Ill Pox Ill	3	4 3 	2 2 I I 3 2 I2	 1 4 	 2 2 1	I I 3	i 4		 2 4 1	8 1 1 	6 7 5	3 1 2 1	i 4 3	2	30 30 30 20 20
erculous Meningitis er Tuberculous Diseases cer umatic Fever	I 17	5 5 14 1	5 I II	 I 9	3 12		3 1 18	16	 !!	1 7	1 2 5 1	3 8	5		130
ingitis	1 28 19 15	3 13 20 17	2 22 12 9	3 9 11 5	10 11 5	8 8 8	8 10 7	9 4 1	14 5 5	12 7 4	4 5 5	1 10 9 4	8 10 6	3 6 1	14 158 137 88
espiratory Organs rhœa & Enteritis endicitis nosis of Liver holism hritis & Bright's	4 7 3	3 13 ··· 2	2 9 1 1	3 1 3	4 I	2 2 3	5	3 2 I	3 1 2	3 I 	2 6 1 2	2 2 I	2 I 	I	55 12 10
sease		8	I 2	3	6	5	2 		• •	4 I	3		6	• •	5 4 4
genital Debility & alformation (inding Premature rth)	12	19	3	8	2	4 3	6	3	5	5 4	15	8	14	·	112
de r Diseases	2 51 213	211	1 37 153	106	28 94	24 85	31	32 84	96	108	103	108	25	33	1604

In calculating death rates, the deaths in this column are allocated over the various Wards.

TABLE 10.

The total Deaths from the seven principal Zymotic Diseases during the year amounted to 122, 38 being of a notifiable and 84 of a non-notifiable character.

,		1909.	1910.	1911.	1912.	1913.	·
Small Pox	• •	• •	• •	• •	• •	• •	
Scarlet Fever		5	2	5	2	2	Notifiable under the In
Diphtheria		19	16	23	19	30	fectious Disease (Not fication Act, 1889)
Enteric Fever	• •	10	10	3	8	6	Death Rate, 0.31.
Measles		• •	17	13	18	30	Not notifiable und
Whooping Cough	• •	42	II	18	35	10	the said Act. Deat Rate, 0.67.
Diarrhœa	• •	49	28	158	31	44) Nate, 0.07.
Totals	••	125	84	220	113	122	

Table showing Deaths from All Causes belonging to the County Borough of Southampton during the Year 1913 (53 weeks ended 3rd January, 1914) classified according to Diseases and Ages. (This Table includes deaths of "Residents" in accordance with the Rules of the Residents of the Residents." in accordance with the Rules of the Registrar-General).

		Totals.			٥ (30	ÕΙ	30		н	H	I	8	I	H	150	61	4	. н	7	I	I	I	7	. ന	4	v	12	4 I	(30
	SEX.	Females.			61 6	5.0	2 0	15	14		:	H	Н			20	9	:		:	Н	:	:	61	61	8	61	Н	23	C	40
	SE	Males.			41	/ +	: 4	15	9	Ι	I	•	H	I	Н	16	I3	4	н	01		Ι	H	5	Н	I	3	II	81	C	01
		95 and up- w'ds			:	•			:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	•	:	:	:	:	:		
		85 to 95			:	•		•	61	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	Н	I	-	-
		75 to 85			:	•	:	:	S	:	:	:	:	•		:	•			:		:	:	:	•	:	:	61	9	C	7
		65 to 75			:		:	•		•	:	:	Н	•		7		:	:		Н	Η	:	:		Η	:	Η	II	(,
		55 to 65			•		:	•	4	:	:	•	:	•		61		:			:			Η	:	•	:	61	13	u	0
۱	AGES.	45 to 55			•	,		•	23	•	•	:	:	:		22	•	:	:	Η	:	:	:	:	:	Η	:	4	8	1	
	AC	35 to 45		· ·	Ϋ́ :			•	H	:	:		•	:		28	•	:	•	:			•	:		Н	:	H	23	_	
		25 to 35			•		•	:	4	H	:			Н		41		:	•	Η			I	3	:	:	:	:	•	-	
ı		15 to 25			n :		:	61		:	:			:	Н	22	Н	:		:	:	:				Η		:	•		
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					•	• • •	•
	DISEASES CLASSIFIED.	XIII. AFFECTIONS PRODUCED BY EXTERNAL CAUSES.	Suicide— Coal Gas Poisoning Hanging Cutting Throat Drowning	Accident— By Coal Gas Poisoning "Burns or Scalds Injury by Fall "Machinery On Railways In Vehicular Traffic By Ships, Boats, or Docks Asphyxiated by Sewer Gas Overlaid	Homicide— Struck on Head with Hammer	XIII. ILL-DEFINED CAUSES. Heart Failure Marasmus over I year of age "Found Dead"	Totals

TABLE 12.

Showing Marriage Rate, Birth Rate, Death Rate, Zymotic Death Rate, and Infantile Mortality for the Old Civil Parishes of the Borough, for the Year 1913.

District.	Marri- age Rate.	Birth Rate.	Death Rate.	Zymotic Death Rate.	Infantile Mortality (Deaths under One Year per 1000 Births registered).
Whole Borough		23.78	12.90	0.98	81.5
Town Proper		23.70	14.25	1.00	86.8
Portswood & Bitterne Park	16.86	24.13	11.42	0.75	76.0
Shirley, Freemantle, and Millbrook		23.70	11.41	1.11	75.4

TABLE 13.

Showing Number and Description of Cases of Infectious Disease occurring in each of the Four Quarters of 1913.

				Quarter	ending.		Total	
Disease.			March. 30th.	June 29th.	Sept. 30th.	Dec. 30th.	for Year.	Mortalit
							_	
Small-pox	• •	• •	• •	• •	I	• •	I	•••
Scarlet Fever			41	44	43	49	177	2
Diphtheria			52	43	6 1	201	357	30
Enteric Fever	• •		7	4	5	17	33	6
Puerperal Fever		• •	I	0	I	I	3	2
Erysipelas			13	15	10	13	51	0
Total	• •	• •	114	106	121	281	622	40

SHOWING ALL DISEASES NOTIFIED DURING THE PAST TEN YEARS, ALSO TOLAL ADMISSIONS TO HOSPITAL AND HOSPITAL SHIP, INCLUDING ISOLATION OF CASES IMPORTED BY VESSELS AND MEMOVED FROM NEIGHBOURING DISTRICTS.

I3.	.anoissimbA	1 1 2 4 4 3 1 1 6 3 3 1 1 6 3 1 1 6 3 1 1 6 3 1 1 6 3 1 1 6 5 1 6 1 6 1 6 1 6 1 6 1 6 1 6 1 6	099
19	Notifications.	357 1 177 177 133 33 33 105	1611
12.	.enoissimbA	246 36 36 96 96	584
1912	Notifications.	192 272 288 2888 13 5 5 	912
II.	.snoissimbA	1	574
161	Notifications.	195	640
IO.	.snoissimbA	1 .81	508
oigi	Notifications.	208 208 219 219 255 25	553
1909.	.snoissimbA	1 195 1 195 1 195 1 195 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	019
19	Notifications.	H . 2 . 2 6 2 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	801
.80	.snoissimbA	197 197 104 105 107 107 107 107 107 107 107 107 107 107	737
1908.	Notifications.	8 . 4 . 7	905
:4061	.enoissimbA	8 . 9	494
19	Notifications.	204 165 21 21 21 21 21 21	464
.90	Admissions.	239 1 78 1 78 30 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	422
19	Notifications.	262 1 56 68 15 88 15	410
1905.	.snoissimbA	189 189 189 189 189 189 189 189 189 189	468
19	Notifications.	7 1 1 2 2 2 5 2 5 2 5 4 4 6 9 4 4 9 9 9 9 9 9 9 9 9 9 9 9 9 9	470
1904.	.snoissimbA	4 · · · · · · · · · · · · · · · · · · ·	296
61 19	Notifications.	1.58 1.58 1.19 1.19 1.19 1.19	343
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		Small Pox Cholera Diphtheria Membranous Croup Erysipelas Scarlet Fever Typhoid Fever Measles Suspected Plague, Adenitis Plague Chicken Pox Other Diseases Pulmonary Tuberculosis Other forms of Tuberculosis Cerebro-Spinal Meningitis Poliomyelitis	
		Scar Scar Scar Scar Scar Scar Scar Scar	

132 **TABLE 15.**

VACCINATION RETURNS.

Year.	Births.	Success- fully Vaccin- ated.	Died Unvaccin- ated.	Insus- ceptible to Vaccin- ation.	ations of		Total.
1891	1714	1365	157	4	• • •	188	1714
1892	1646	1312	178	8	• • •	147	*1646
1893	1701	1407	180	16	•••	98	1701
1894	1796	1496	185	28	•••	87	1796
1895	1874	1560	207	16	•••	91	1874
1896	1912	1577	231	18	• • •	86	1912
1897	1886	1580	195	15	• • •	96	1886 á
1898	1847	1491	218	19	• • •	119	1847
1899	1802	1425	245	12	•••	120	1802
1900	1751	1414	217	7	•••	113	1751
1901	1821	1502	202	6	•••	101	18211
1902	1739	1466	163	3	•••	107	1739
1903	1697	1459	152	6	• • •	80	1697
1904	1683	1435	167	9		72	1683;
1905	1543	1319	153	4	•••	67	1543
1906	1570	1312	150	6	• • •	102	1570
1907	1504	1240	149	3	•••	112	1504
1908	1585	1203	134	9		239	1585
1909	†2681	1889	197	14	• • •	581	2681
1910	†2931	1863	187	5	651	225	2931
1911	†2851	1630	263	9	771	178	2851
1912	†2823	1524	164	8	908	219	2823

[•] One Child had Small-pox.

[†] Returns for whole Borough.

ABSTRACT FROM THE METEOROLOGICAL REGISTER KEPT AT THE ORDNANCE SURVEY OFFICE, SOUTHAMPTON, DURING THE YEAR 1913.

1																
6	.9	Dat	26th	21st	5th &	20th	26th	29th	20th	1st	8th	25th	22nd	31st	29th June	14/6/10
Sunshine.		mixsM No.oV	5.8	7.6	7.8	10.4	13.4	14.2	13.3	12.6	10.7	6.5	7.1	6.2	14.2	15.5
S	.oV.	Total I	36.7	77.3	98.0	123.4	217.5	205.8	139.2	170.2	139.9	82.5	78.0	49.6	1418.1	1689.3
	No. of days to		24	11	22	18	12	11	12	10	12	19	19	12	182	176
FALL.	*	ete Date	11th	1st	21st	29th	29th	19th	10th	31st	1st	20th	21st	23rd	31st Aug.	5/6/05
RAINFALL.	ui y	Greate Guantiti La hou	0.930	0.370	0.385	069.0	0.970	0.230	0.270	1.150	0.610	0.700	0.940	0.770	1.150	2.480
		Total Inche	5.265	1.245	3,445	3.035	3.235	0.705	0.965	2.080	2.130	4.260	3.690	1.910	31.965	3/3/09/32.942
		Date.	13th	19th	18th	13th	7th	9th	9th	26th	15th	24th	23rd	31st	13th Jan.	3/3/09
		Lowe	26.0	28.5	29.4	28.0	36.0	44.0	48.2	47.0	46.3	39.5	29.0	28.0	26.0	11.0
	•	Date	23rd	4th	30th	23rd	27th	29th	31st	26th	27th	25th	11th	1st	29th June	89.1 22/7/11
Temperature.	159	Mean High mixaM	.9 51.9	.4 54.2	.657.3	48.1 66.2	.5 78.0	.782.0	.776.3	.7 75.4	.7 71.5	.665.2	49.1 60.0	.7 56.0	.982.0	51.0 89.1
MPERA	.x	orqqA	42	9 43	.5 45	.3 48	2 56	.0 58	.3 59.	61	.3 59.	54		5 42.	.7 51.	
TE	Mean.	Min.	38.1	39.	39	41	47.	51	53	53.9	53	48.8	43.3	38.	45	44.2
		Max. in Air.	47.7	46.9	51.6	54.8	65.8	66.3	0.99	69.5	0.99	60.3	54.8	46.9	58.1	57.9
	Mean at	9 p.m.	43.1	41.9	44.8	47.0	53.3	57.5	59.8	61.3	57.7	52.4	48.9	42.5	50.9	49.7
	Mea	9 a.m.9	42.4	40.8	44.6	48.4	55.7	59.5	59.8	62.2	58.5	53.9	48.3	41.7	51.3	51.4
	6	Date	20th	lst	19th	27th	4th	5th	6th	29th	13th	29th	12th	3rd	19th Mar.	4/12/09
	.gr	Minim Readin	29.12	29.55	29.05	29.42	29.43	29.82	29.73	29.75	29.32	29.24	29.24	29.41	29.05 19th Mar.	28.638 4/12/09
Barometer.		Date.	26th	12th	9th	9th	24th	28th	1st	26th	8th	13th	28th &	21st & 31st	12th Feb.	29/1/02
BARON	uin	Maxim iibsəA	30.33	30.71	30.65	30.23	30.34	30.42	30.38	30.30	30.34	30.46	30.48	30.67	30.71 12th Feb.	30.974
	at	p.m.	29.794).134	0.082	0.074		9.875	9.956	0.159	9.997	9.948
	Mean	a.m. 9	29.831 26	30.220 30.189	29.932 29.912	29.884 29.882	29.934 29.939	30.131 30.134	30.084 30.082	30.083 30.074	29.978 29.970	29.879 29.875	29.948 29.956	30.145 30.159	.004 29	.954 2:
		<u> </u>				_				30	29		. 29		30	23
	Month.		Jan	Feb	March	April	May	June	July	August	Sept	Oct	Nov.	Dec.	For the year 30.004 29.997	For 10 years, 1903–1912
		-	_													

This Table has been supplied by the courtesy of Colonel C. F. CLOSE, C.M.G., R.E., Director-General of Ordnance Survey.

Analyst's Department.

ANNUAL REPORT

For the Year ended 31st December, 1913.

To the Worshipful the Mayor, Aldermen, and Councillors of the County Borough of Southampton.

GENTLEMEN,

I have the honour to submit for your information an account of the work done in this Department during the past year.

Section I.—Sale of Food and Drugs Acts.

The number of samples submitted under the above Acts during the year 1913 was 545.

Of this number 442 samples were submitted by Inspectors 68 by Residents in the Borough, 10 by Residents outside the Borough, and 25 by the Borough of Newbury.

In the following tables the samples received from outside the Borough and from Newbury are not included.

The character of the samples, the number of each article submitted, and the percentage of Adulterated samples are given in Table I.

TABLE I.

Nature of A	Article.			Number of Samples.	Number of Samples Adulterated.	Percentage of Samples Adulterated.
Bread and Butter	• • •	• • •	• • •	I	• • •	• • •
Butter	• • •	• • •	•••	IOI	3	2.97
Cheese	• • •	• • •	• • •	17	• • •	• • •
Coffee		• • •		23	4	17.38
Cream		• • •	•••	IO	• • •	• • •
Flour	• • •	• • •		8	• • •	• • •
Ginger (Ground)	• • •	• • •	• • •	5	I	20
Lard	• • •		• • •	37	•••	• • •
Margarine	• • •	• • •		5	• • •	• • •
Milk	• • •	• • •		261	26	9.96
Do. (Condensed)	• • •			3	• • •	• • •
Do. (Human)	• • •	• • •		I	• • •	• • •
Do. (Separated)	• • •	• • •		I	• • •	0 0 0
Mustard	• • •	0 0 2		6	• • •	
Olive Oil	• • •	• • •	• • •	4	• • •	• • •
Pepper	• • •	• • •		23	• • •	• • •
Vinegar	• • •	• • •	• • •	5	***	• • •
Totals	• • •	• • •	•••	511	34	6.65

The adulterated samples and amount of Adulteration, prosecutions and result of proceedings are given in Table II.

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TABLE II.

Article	No. on	Nature and Amount	A	Res	ult.
Analysed.	Register.	of Adulteration.	Action taken.	Fines.	Costs.
Butter	326	100% margarine, con-	Test sample		
	378	taining 25% of butter 100% margarine con-	Summoned	£ı	6/6
,,		taining 23% of butter	Test sample		
"	425	taining 50% of butter	_		
Coffee	62 89	33% of chicory 33.11% of chicory	Test sample Summoned		4/-
"	336 383	70% of chicory 75% of chicory	Test sample Summoned	£2	10/6
Ginger	332	40% of calcium carbon-	Test sample		
Milk	49	2.9% added water	None		
"	168	3.33% fat deficient	,,		
"	170	6.66% ,,	"		
"	173 176	0.000/	,,		-
) :	178	3.33% ",	"		
22	182	3.33%	,,,		
"	186	3.33%	,,		
"	293	1.33% fat deficient and 2.58% added water	Summoned		8/-
"	294	2.66% fat deficient and 8.2% added water	,,	£2	8/6
,,	295	2.9% added water	, ,,		8/0
"	2 96	11.05%	Cautioned	£2	8/6
"	340	8.66% fat deficient		Cr	6/6
"	362	11.33% fat deficient and 3.41% added water	Summoned	Ęı	0/0
	419	6.33% fat deficient	Cautioned		
"	p. 22	40% fat deficient	Private		
j	p. 24	6.6% fat deficient	"		
,,	p. 26	6.6% ,,	"		
,,	p. 27	13.33% ,,	,,		
"	p. 6	14.94% added water	"		
"	p. 10	3.33% fat deficient and 17.88% added water	"		
,,	p. 71	50% fat deficient and 6.47% added water	,,		
,,	p. 73	86% fat deficient	"		
"	p. 75	82.6%	,,,		
"	p. 81	11% fat deficient and	,,		
	1	8.47% added water			N.

The total fines for the year amounted to £8 10s., and the total costs to £2 10s. 6d.

The number of samples analysed is four more than in 1912.

The number of samples from Inspectors is 10 more than n 1912.

BUTTER.

The number of samples analysed was 101, being 10 more than in 1912.

Three samples, or 2.96 per cent., were adulterated.

These adulterated samples are remarkable, as in every case t was not simply the substitution of margarine for butter, but ordinary margarine was mixed with butter.

In defence it was stated that the mixture was accidental. t must have been a recurring accident, for the test sample aken from the same shop six weeks previously was of the same haracter, but the prosecuting Solicitor was not permitted to orduce this evidence.

This mixing of butter and margarine seems to be a common ractice, the detection of which adulteration is difficult, because he article is not exposed for sale, and the Inspector does not ee it.

Again, it is found that a stranger is supplied with a genuine rticle, and regular customers are unwilling to help the Inspectors.

Two samples only were official.

COFFEE.

The Justices, as a rule, are inclined to view the addition of hicory to coffee lightly, and inflict merely nominal fines, but a the case of Sample No. 383 they expressed the opinion, not-rithstanding a clever defence, that it was a bad case, and made an epenalty £2 and costs.

Four samples were test samples.

CREAM.

Since the regulations as to the sale of cream were published to have been unable to get an unlabelled article.

Whenever cream is asked for "Preserved Cream" is supplied vessels properly labelled, and the boric acid is always well ithin the limit of 0.5 per cent. stated on the label.

INGER.

This was a sample of ground ginger containing lumps of calcium carbonate. A second sample from the same source contained only a slight excess of lime, and from information subsequently received it appears that alterations were in progress at the time, and that the calcium carbonate was accidentally present.

MILK.

The number of samples analysed was 261, or 20 more than in 1912.

The percentage of Adulterated samples was 9.96, compared with 11.38 per cent. in the previous year.

MONTHLY AVERAGES.

*	TAT	MIIIDI						
		Fat.	Non-	Fatty Solie	ds.	Total Solids.		
January	• • •	3.74		8.92	• • •	12.66		
0			•	8.82		12.42		
February	• • •	$3 \cdot 54$	• • •	_	• • •			
March	• • •	3.78	• • •	8.83	• • •	12.61		
April		4.11		8.79	• • •	12.90		
May		3.83	• • •	9.72		13.55		
		3.46		8.79		12.25		
June	• • •					12.41		
July		3.70	• • •	8.71	• • •	·		
August		3.43	• • •	8.81	• • •	12.24		
September		3.93		8.81		12.74		
October		4.09		8.88		12.97		
_				9.18		13.14		
November	• • •	3.96	• • •		• • •			
December		3.64	• • •	8.87	• • •	12.59		

The month of April showed the highest per cent. of fat, an May the highest percentage of non-fatty solids.

June, July, and August were the months showing min of poorest quality, and April, May, October and Novemby yielded milk of best quality.

It will be seen from the above figures that the poorest mongave milk considerably above the limit of 3 per cent. fat, as 8.5 per cent. non-fatty solids.

COMPOSITION OF MILK SUPPLY.

Table III. shows the composition of genuine samples for the past seven years.

TABLE III.

ear		190)7.	190)8.	190	09.	1910. 1911.		1911. 1912.		1913.			
ource		Inspectors	Private	Inspectors	Private	Inspectors	Private	Inspectors	Private	Inspectors	Private	Inspectors	Private	Inspectors	Private
otal S	olids	12.67 3.85	12.47 3.55	12.57 3.67	12.55 3.68	12.73 3.82	12.74	12.61 3.75	12.62 3.76	12.48 3.72	12.60	12.48 3.63	12.54	12.62	13.19 4.33

The general averages of genuine samples were:-

		1907	1908	1909	1910	1011	1912	1913
Total Solids	s	12.63%	12.56%	12.73%	12.61%	12.49%	12.48%	12.73%
Fat		3.79%	3.67%	3.82%	3.75%	3.73%	3.63%	3.83%

The averages for adulterated samples for the seven years were:—

TABLE IV.

ear	,	19	07.	190	08.	19	09.	19	10.	191	11.	19	12.	19	13.
ource		Inspectors	Private												
otal Sc	olids	11.03	11.75	11.26	11.04	11.36	11.30	11.40	11.32	10.45	9.95	11.30	11.82	11.53	10.36
ıt	• • •	2.78	2.85	2.78	2.62	3.04	2.59	2.92	3.16	3.07	3.00	3.00	2.85	2.90	2.16

The general average of supply for 1913 shown above is 12.73 per cent. of total solids, containing 3.83 per cent. of fat, which is a marked improvement on the average for 1912.

I would again point out the desirability of the farmer selling his milk by quality on a basis of standard price calculated on the unit of one-half per cent. (0.5) fat, with a percentage added or deducted as the price advanced above this standard or fell below it.

The farmers are very suspicious of this, because, they say, they would have no check upon the person making the determination of the fat.

I would suggest the formation on co-operative principles of depots for definite districts to which the farmers would deliver their milk. Samples of each consignment would be taken, the fat determined, and the price fixed according to standard.

The milk so received would be mixed and sold from the depot to the dairymen.

The advantages of such a system would be:-

I. A more uniform supply of milk, as to quality, to the consumer.

2. There would be no incentive to the farmer to adulterate

his milk.

3. The farmer would have an incentive to improve his stock and their feed.

4. Such improvement would improve his manure and

also his land.

5. All consignments would be from the depot, would be greater in quantity and command better railway rates.

6. The limit for fat and non-fatty solids could be raised without injury to the farmer, and honest retailer.

In connection with advantage No. 4 the reply received from farmers is invariably "Umph! and then up would go the rent of my farm."

In a case before the Justices in the latter part of 1913, the defence was that the milk was sold as it came from the cows. In his evidence the farmer said the cattle were turned out on water meadows, and fed on "Brewer's grains and cabbages." No hay, roots, or cake being used for feeding.

Under present arrangements this man was getting the same price per gallon for his milk as another farmer whose milk was quite 60 per cent. better.

Seven samples were test samples.

The remaining articles were all genuine and present not feature calling for comment.

SUPPLEMENTARY REPORT.

Public Health (First Series, Unsound Food) Regulations, 1908.

At the request of the Local Government Board the articles taken under the above Act are not included with the samples taken under the Food and Drugs Acts, but are dealt with annually in a Supplementary Report.

The number of articles received under the above Act was 25, namely:—

					Sa	amples.	
Beef (tini	ned)		• • •	• • •		2	
Butter		• • •	• • •	• • •		20	
Cream	• • •		• • •	• • •		I	
Milk (con	densed)		• • •			2	

BEEF.

The contents of the two tins of beef were in a state of decomposition, and when cut into showed dark patches and gave off an unpleasant odour.

The interior surfaces of the tins were covered with black patches, and around the soldering was a bulky mass of black powder, which on further examination was proved to contain lead.

BUTTER.

Two of the 20 samples received were adulterated, containing respectively 17.41 and 17.05 per cent. of water.

Eighteen samples contained boric acid, the quantity ranging from 0.07 to 0.46 per cent.

CREAM.

This was "Preserved Cream" containing over 40 per cent. of fat and 0.16 per cent. of boric acid.

MILK (CONDENSED).

One of the two samples was in a state of decomposition, being liquid, strongly acid, and discoloured.

The other sample was in a good condition.

SECTION II.—GENERAL.

(A) RAG FLOCK ACT.

Fourteen samples of rag flock were submitted, and all of them complied, as to cleanliness, with the requirements of the Act.

This Act was passed to prevent the use of dirty clothes and rags, both native and imported, which were being teased (devilled) into flocks used for bedding, mattresses, etc., without having undergone any process of cleansing and disinfecting.

(B) OTHER SOURCES.

Borough Engineer's Departm	ent	• • •	• • •	4
Education Department	• • •	• • •		2
Medical Officer's Department	• • •	• • •	• • •	93
Private	• • •		• • •	35
Waterwork Department	• • •	• • •	• • •	12
Water for hardness	• • •	• • •	• • •	1045
Total	• • •	• • •	• • •	1191

BOROUGH ENGINEER'S DEPARTMENT.

The samples from this department were plaster and cement used in new buildings, owing to their emitting unpleasant odours when used, and scrapings from ceilings and walls which had shown discolouration.

EDUCATION DEPARTMENT.

Two samples of white lead were examined, and one sample contained zinc carbonate.

MEDICAL OFFICER'S DEPARTMENT.

The samples were all water from the Borough supplies and from wells supplying houses. Three wells were condemned and closed.

PRIVATE.

The articles submitted privately were: Cocoanut oil, sample; egg yolk, 2 samples; human organs for toxicologica analysis, 10 samples; lard, 5 samples; liquids, 2 samples; margarine, 1 sample; "Oleo," 1 sample; water, 9 samples.

WATERWORKS DEPARTMENT.

The samples were all water, and were analysed in consequence of complaints and for special purposes of the department.

WATER FOR HARDNESS.

The softening of the supply during the year has been:—
For the Otterbourne supply about the same as for 1912, the averages showing o.r° difference.

The supplies from the South Hants Company show an increase in the averages of 0.6° for the water at Bitterne Park, and a decrease of 0.63° in the Shirley district.

SUMMARY OF HARDNESS FOR THE YEAR 1913.

Course	Hardness.						
Source.	Highest.	Lowest.	Average.				
tterbourne—Oxford Avenue buth Hants—Bitterne Park Do. Albany Road	15.22° 12.23° 13.70°	2.56° 2.36° 4.30°	8.18° 7.41° 8.83°				

Fees received for year ending Dec. 31st, 1913 69 11 6 Fees outstanding on Dec. 31st, 1913 ... 5 19 0

SUMMARY OF SAMPLES FOR THE YEAR 1913.

Food and Drugs		• • •			545
Public Health Regula	ations	• • •	• • •	• • •	25
Rag Flock Act	• • •	• • •	• • •		14
General	• • •	• • •	• • •		1191
Total	• • •	• • •	• • •	• • •	1775

I am, Gentlemen,

Your Obedient Servant,

J. BRIERLEY, Public Analyst.

